

ARCHIVES & RECORDS MANAGEMENT DIVISION 1129 East Washington Street PO Box 40238 Olympia, WA 98504-0238 Tel (360) 586-4900 Fax (360) 664-8814 http://www.sos.wa.gov/archives

May 19, 2010

TO:

Steve Ryser, State Records Committee Member Traci Friedl, State Records Committee Member Mike Steenhout, State Records Committee Member

Jerry Handfield, State Archivist

Russell Wood, State Records Manager

FROM:

Michele Mallery, State Government Records Management Specialist

Records Management Office

RE:

June 2, 2010 SRC Packets

Enclosed are the June 2, 2010 SRC packets. Below is the contact information for the Records Officers who submitted schedules for review and approval by the committee.

- ACB: Jennifer Sciba (360) 586-0952 or jennifers@cpaboard.wa.gov
- DFI: Pauline Yale (360) 902-0502 or pyale@dfi.wa.gov
- DOH: Sid McAlpin (360)236-3911 or <u>Sid.Mcalpin@doh.wa.gov</u>
- DOL: Hannah Fultz (360)359-4013 or hfultz@dol.wa.gov
- L&I: Lysa Homan Walker (360)902-5777 or wlys235@lni.wa.gov
- LCB: Stacii McKeon (360) 664-1693 or skm@lig.wa.gov
- Lottery: Bruce Eisentrout (360)664-4790 or <u>beisentrout@walottery.com</u>
- OSOS: Brenda Galarza (360) 236-5040 or Brenda.galarza@sos.wa.gov
- UW: Barbara Benson (206) 543-7950 or bbenson@u.washington.edu
- WSU: Ralph Jenks (509) 335-2004 or jenks@wsu.edu

Please remember to cc: me at <u>michele.mallery@sos.wa.gov</u> on e-mails you send to the Records Officers so that I know to expect updated schedules.

If you have any questions please feel free to contact me at (360) 586-4901.

Michele Mallery State Government Records Management Specialist MEM



STATE OF WASHINGTON

STATE RECORDS COMMITTEE

Office of the State Auditor • Office of Financial Management • Office of the Attorney General • State Archives

PO Box 40238 • Olympia, Washington 98504-0238 • (360) 586-4900

June 2, 2010 – 1:30 pm Archives Conference Room, Olympia, WA

AGENDA

I. ROUTINE ITEMS

- A. Call to Order
- B. Introduction of Guests
- C. Approve May 5, 2010 Minutes
- D. Adoption of Today's Agenda

II. WASHINGTON STATE ARCHIVES UPDATES

- A. Announcements from the State Archivist
- B. Update on Digitization After Destruction (DAD) applications

III. OLD BUSINESS

- A. Tabled items from previous meetings:
 - 1. Department of Licensing

Office 520, 523 – Driver Examining
Office 638 – Business & Professions – Cosmetology
Office 638, 611, 688, 685, 693, 666 – Business & Professions – Professional Licensing Support Services)

IV. NEW BUSINESS

- A. State Agency Unique Records Retention Schedules
 - 1. Washington State University

Office 3150 - Speech & Hearing Sciences

2. Board of Accountancy

Office 100 – Board of Accountancy

3. Department of Financial Institutions

Office 500 - Consumer Services Division

4. Washington State Lottery

Office 450 - Communications

5. Washington State Liquor Control Board

Office 435 – Distribution Center

6. Department of Health

Office 422 - Center for Health Statistics - Death with Dignity Act

7. Office of the Secretary of State

Office 270 – Legacy Projects
Office 400 - Elections

8. Department of Labor & Industries

Office 540 – Health Services Analysis (HSA)
Office 560 – Policy & Quality Coordination
Office 564 – Insurance Services – Policy & Coordination – Pension
Office 934 – Administrative Services – Financial Services/Legal Services - Third Party.

9. University of Washington

Office Any Office
Office 08/09 – Facilities Services – Campus Engineering
Office 09/07 – Payroll
Office 27/11/04 – Med: Rehab Med: Residency Training Program

V. OTHER BUSINESS

- VI. **NEXT MEETING** 1:30 pm July 7, 2010
- VII. ADJOURNMENT



STATE OF WASHINGTON

STATE RECORDS COMMITTEE

Office of the State Auditor • Office of Financial Management • Office of the Attorney General • State Archives

PO Box 40238 • Olympia, Washington 98504-0238 • (360) 586-4900

MEETING MINUTES

May 5, 2010 – 1:30 pm Archives Conference Room, Olympia

Members Present: Steve Ryser (Office of the State Auditor); Traci Friedl (Office of the Attorney General); Mike Steenhout (Office of Financial Management); Jerry Handfield (State Archivist)

Staff Present: Russell Wood (State Records Manager); Michele Mallery (Records Management); Megan Bezzo (Records Management)

Records Officers/Guests: Millie Brombacher (Department of Social and Health Services); Lysa Homan Walker (Department of Labor and Industries); Cara Bell (University of Washington); Barbara Benson (University of Washington); Christine Taylor (University of Washington); Sid McAlpin (Department of Health); Anita Wieland (Office of Financial Management); Jack Day (Department of Labor & Industries); Laura Russell (Office of the Superintendent of Public Instruction); Tammy Lee (Department of Labor & Industries); Reasa Pearson (Department of Labor & Industries); Dawn Gast (Department of Labor & Industries); Bruce Eisentrout Washington State Lottery); Mike Middleton (Office of the Superintendent of Public Instruction); Cathy Downs (Department of Transportation); Marta Carlo (Department of Transportation); Grant Heap (Department of Transportation); Sidse Neilson (Department of Labor & Industries).

I. ROUTINE BUSINESS

- A. Call to Order: Steve Ryser called the meeting to order at 1:30 p.m.
- B. Introduction of Records Officers/Guests: All Records Officers and guests were introduced.
- C. Approve March 3, 2010 Minutes: Ryser called for a motion to approve the April 7, 2010 minutes; moved by Steenhout, seconded by Ryser.

Resolution: Motion carried.

D. Adoption of Today's Agenda: Ryser called for a motion to approve the agenda as amended; moved by Steenhout, seconded by Ryser.

Resolution: Motion carried.

II. WASHINGTON STATE ARCHIVES UPDATES

- A. Announcements from the State Archivist
- B. The State Archivist wanted to thank the committee for allowing him to phone in from the National Archives for the April meeting. The State archivist announced he toured the new exhibit at the National Visitors Center of the Congress. You no longer have to wait in long lines in the heat. The State Archivist was given a tour and asked where the exhibit was for the first President. The State Archivist asked the Committee if they knew who the first President of the United States was and it wasn't George Washington. The first President was Samuel Huntington. The State Archivist also asked if the committee members knew where the U.S Constitution is housed. It is housed at the

National Archives. He also asked who collects the electoral ballots. The State Archivist announced it is the Archivist of the United States. Usually it is the Secretary of State, but she is busy with other duties.

- **C.** The State Archivist presented an award to the Records Officer of the Department of Transportation for reducing the number of unique records retention schedules in their agency.
- **D.** The State Archivist reported on the budget and announced the Archives section will not employ furlough days to reduce the state budget. It has yet to be decided where the approximately \$120K cuts will come from. There currently is no intent for lay-offs. Agency Records Officers were not aware if their agencies would implement furloughs.
- E. The State Archivist mentioned the announcement regarding records maintained and preserved on digital copiers. It was sent out to about 1000 local government agencies as well as state government agencies. The Attorney General's Office and the State Archivist have received several calls regarding this. The State Archivist called the National Institute of Standards for advice. Agencies reported total panic in regards to the announcement. The Records Officers have received the announcement and should train and educate staff, as well as refer to the Washington State Archives for advice.
- F. The State Archivist met with a chief investigative television reporter from Portland Oregon who was doing a study on identity fraud and identity theft. The reporters concern was Social Security Numbers contained within records. The State Archivist gave the reporter a tour of the Archives. The State Archivist recommended to the reporter that he should do a study on rural mail boxes, which are the main single source of identity theft. There is a report of complaints that are collected by the FTC on identity theft and identity fraud. It rates the states for highest in identity theft. Washington State was ranked 7th in identity theft and fraud in 2007 when the Digital Archives was just getting started. Washington State is now 15th. Clearly there is no connection between putting records online and adding to identity theft. 72 % all identity theft and identity fraud is by someone you know, have done business with, or someone in your home. The report should be televised in 2 weeks.
- **G.** The Northwest Archives branch in Bellingham had 2 researchers who did a presentation on "A Tale of Archives and Discovery".
- **H.** The State Records Manager has been working with the Governor's office regarding their retention schedules.
- I. The State Archivist provided an update on the new Imaging Manager and his status relating to his stroke. Baylen Limasa should return to work in early June.
- **J.** The State Archivist is trying to time his surgery to fix his nose so it doesn't interfere with the State Records Committee meetings.
- K. The State Archivist presented "Social Justice in Archives; you can't have one without the other". in King County. The State Archivist used examples from other countries and historical incidents. It brought home to the audience that in a democracy records are particularly important and totalitarian governments are used for other purposes.
- L. The State Archivist announced the large scale scanner is up and running.
- M. There was a question from the Office of Financial Management regarding the Schroll litigation hold that was recently lifted and how the records officers were to be handled and how the Records Center was going to handle this. The State Archivist and the State Records Manager had not heard anything, but the Department of Social and Health Services records officer announced that in the next few months the Records Center will be distributing a large report of the disposals for the Records Officers to sign off on.
- N. The State Archivist announced that St. Martins University has recently published a publication that is full of photographs from the Washington State Archives, from the Susan Parish collection.
- O. Update on Digitization After Destruction (DAD) Applications: Russell Wood there were two applications that were signed off in April from Local Government agencies. There are two applications from State Government agencies that are ready for approval. There are 10 applications (4 out of the 10 are from the University of Washington) from State Government agencies in the backlog pending approval.

III. OLD BUSINESS

A. Tabled item from March 3, 2010 meeting

1. Department Social and Health Services Office 765 (Child Study & Treatment Center) dated March 11, 2010.

Action: Motion to approve: Friedl, seconded by Handfield.

Resolution: Motion carried.

2. Washington State University Office 2980 (Business Services – Sponsored Programs Services) dated February 24, 2010.

Action: Motion to approve: Friedl; seconded by Handfield.

Resolution: Motion carried.

3. Department of Licensing Office 520, 523 (Driver Examining) dated April 12, 2010

Action: Motion to table as no records officer present to clarify: Steenhout, seconded by Handfield.

Resolution: Motion carried.

3.a. Department of Licensing Office 611 (Business & Professions – Professional Athletes)

dated March 15, 2010

Action: Agency Requested to withdraw

Resolution: Motion carried.

3.b. Department of Licensing Office 638 (Business & Professions – Cosmetology) dated

March 12, 2010

Action: Motion to table as no records officer present to clarify. Steenhout; seconded by Handfield.

Resolution: Motion carried.

3.c. Department of Licensing Office 638, 611, 688, 685, 693, 666 (Business & Profession – Professional Licensing Support Services) dated April 12, 2010

Action: Motion to table as no records officer present to clarify: Ryser; seconded by Steenhout.

Resolution: Motion carried.

IV. NEW BUSINESS

A. State Agency Unique Records Retention Schedule

1. Washington State Lottery

Records Retention Schedule for Office 400 - Marketing, dated April 8, 2010.

Action: Motion to approve: Steenhout, seconded by Ryser.

Resolution: Motion carried.

2. Department of Natural Resources

Records Retention Schedule for Office 608 - Public Land Survey Office, dated April 14, 2010.

Action: Motion to approve: Handfield, seconded by Steenhout.

Resolution: Motion carried.

3. Department of Social and Health Services

Records Retention Schedule for Office 760 – Division of Behavioral Health and Recovery,

Mental Health, dated April 15, 2010.

Action: Motion to approve: Friedl; seconded by Steenhout.

Resolution: Motion carried.

4. Office of the Superintendent of Public Instruction

Records Retention Schedule for Office 530 – Assessment and Student Information, dated March 16, 2010.

Action: Motion to approve: Friedl; seconded by Ryser.

Resolution: Motion carried.

5. Washington State Patrol

Records Retention Schedule for Office 120 - Office of Professional Standards, dated April 1, 2010

Action: Motion to approve: Friedl; seconded by Steenhout.

Resolution: Motion carried

6. Department of Transportation

Records Retention Schedule for Office 064 - Cartography & GIS, dated April 22, 2010.

Action: Motion to approve: Handfield; seconded by Steenhout.

Resolution: Motion carried.

7. Department of Licensing

Records Retention Schedule for 422 - Vehicle and Special Licensing, dated April 2, 2010.

Action: Motion to approve: Friedl; seconded by Handfield.

Resolution: Motion carried.

Records Retention Schedule for Office 651 - Engineers Board, dated April 2, 2010

Action: Motion to approve: Steenhout; seconded by Friedl.

Resolution: Motion carried.

8. Department of Labor & Industries

Records Retention Schedule for Office 485 - Specialty Compliance Services - Elevator Program, dated April 2, 2010

Action: Motion to approve: Friedl; seconded by Steenhout.

Resolution: Motion carried.

Records Retention Schedule for Office 495 - Prevailing Wage, dated April 14, 2010.

Action: Motion to approve: Friedl; seconded by Steenhout

Resolution: Motion carried.

Records Retention Schedule for Office 518 – Claims Administration – Return to Work Program -WorkSource Program, dated April 8, 2010

Action: Motion to approve: Steenhout; seconded by Friedl.

Resolution: Motion carried.

9. Department of Health

Records Retention Schedule for Office 417 - EH - Office of Shellfish & Water Protection, dated April 4, 2010

Action: Motion to approve: Ryser; seconded by Handfield.

Resolution: Motion carried.

Records Retention Schedule for Office 487 - CFH - Office of Maternal & Child Health, dated March 10, 2010.

Action: Motion to approve: Friedl: seconded by Handfield.

Resolution: Motion carried.

Records Retention Schedule for Office 0607 - HSQA - Adjudicative Services Unit, dated March 27, 2010

Action: Motion to approve: Friedl; seconded by Steenhout.

Resolution: Motion carried.

10. University of Washington

Records Retention Schedule for Office Any Office, dated April 5, 2010.

Action: Motion to table items 5-12: Ryser; seconded by Handfield. Motion to approve items 2

- 4 and 13: Steenhout; seconded by Friedl

Resolution: Motion carried.

Records Retention Schedule for Office 34/05/01 – EH&S: Radiation Safety, dated April 5, 2010.

Action: Motion to approve: Steenhout; seconded by Friedl.

Resolution: Motion carried.

V. OTHER BUSINESS

A. Christine Taylor from the University of Washington School of Medicine wanted to publicly thank Megan Bezzo for her work on revising the Public Health Records Retention Schedule.

VI. NEXT MEETING

When: June 2, 2010 - 1:30pm

Where: Archives Conference Room, Archives and Records Building, Olympia.

VII. ADJOURNMENT

Action: Motion to adjourn: Handfield, seconded by Steenhout.

Resolution: Meeting adjourned 3:31 p.m.

CERTIFICATION OF MINUTES OF THE STATE RECORDS COMMITTEE MEETING:

I, Steve Ryser, Chair of the State Records Committee, certify that the above is a true and correct transcript of the minutes of a public meeting of the State Records Committee of the Secretary of State, Archives and Records Management Division, held in the State Archives Building conference room on May 5 2010 and that the public meeting was duly called and held in all respects in accordance with the laws of the State of Washington and that a quorum was present.

Chair Signature	 Date

II. WASHINGTON STATE ARCHIVES UPDATES

A. Announcements from the State Archivist

II. WASHINGTON STATE ARCHIVES UPDATES

B. Update on Digitization of Destruction (DAD) Applications

III. OLD BUSINESS

A.1 Tabled

Office 520, 523 (Driver Examining) Department of Licensing

Action: Motion to table for further clarification of automated system; Ryser,

seconded by Friedl

Resolution: Motion carried.

520, 523 OFFICE NO. = OF DATE OF SUBMITTAL 360-902-3858 5/17/10 PAGE 10-06-62248 RECORDS OFFICER PHONE NO. REQUEST FOR ACORDS RETENTION SCHEDULE (360) 359-4013 AND DISPOSITION AUTHORITY NUMBER 6 Mo. RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 eby centify that I have completed an is schedule for accuracy. Katherine Stephens 0 **Driver Examining** 6 Mo OFFICE NAME When entered into ATS RECORDS OFFICER SIGNATURE appraisal of the record series OFM conducted at Licensing Services Offices. This exam information is Title: DRIVER LICENSE AUTOMATED TESTING SYSTEM (ATS) knowledge test exams, and printed driver knowledge exams and answer sheets used by examinees who do not use the ATS Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Record series consists of audio tape recordings of oral driver Washington State Archives ☐ REVISED ☐ DISCONTINUED ☐ TRANSFER then entered into the ATS database by agency staff. 240 Licensing
ADDRESS (MS or Street, City and Zip Code) Secretary of State 48001, Olympia, 98504 RECORDS OFFICER NAME Hannah Fultz X NEW AGENCY OFM NO.

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III. OLD BUSINESS

A.1.a Tabled

Office 638 (Business & Professions Department of Licensing Cosmetology)

Action: Motion to table to clarify, committee did not have all schedules to review. Steenhout, seconded by Friedl.

Steermout, seconded by Fire **Resolution:** Motion carried.

Secretary of State

ADDRESS (MS or Street, City and Zip Code)

RECORDS OFFICER NAME Hannah Fultz

MS: 48026

Licensing

240

AGENCY OFM NO.

Records Management Section PO Box 40238 Olympia, WA 98504-0238 Washington State Archives (360) 586-4901

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REFERENCE: RCW 40.14

OFFICE NAME

Business and Professions – Cosmetology

RECORDS COORDINATOR CONTACT NAME

RECORDS COORDINATOR PHONE NO.

OFFICE NO. 638

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Cameron Dalmas

(360) 664-6643

RECORDS OFFICER PHONE NO.

DATE OF SUBMITTAL 5/17/10

(360) 359-4013

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ADVISORY BOARD MEMBER FILES

Board

Provides a record of board member information. Including but not limited to board member applications, résumés, letters of reference, correspondence, oath of office, copies of W-4, copies of travel vouchers.

RECORDS COORDINATOR PHONE NO. 638 DATE OF SUBMITTAL (360) 664-6643 5/17/10 PAGE 10-06-62250 RECORDS OFFICER PHONE NO. REQUEST FOR GCORDS RETENTION SCHEDULE (360) 359-4013 Business and Professions – Cosmetology AND DISPOSITION AUTHORITY NUMBER 6 years RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 48 months RECORDS OFFICER SIGNATURE (Required) JAParby certify that I have completed an appraisal of the record series and examined this schjedale for accuracy. Cameron Dalmas 24 months OFFICE NAME Date of Request $^{
m OPR}$ Provides application to put a license on inactive status up to 6 years. Record series includes but is not limited to application for inactive status, confirmation letter, and validation of transaction. Title: COSMETOLOGY INACTIVE LICENSE STATUS REQUEST Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Washington State Archives NEW | REVISED | TRANSFER Secretary of State ADDRESS (MS or Street, City and Zip Code) Licensing RECORDS OFFICER NAME Hannah Fuftz AGENCY OFM NO. MS: 48026 N O 240

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AGENCY OFM NO.

Washington State Archives Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901

REQUEST FOLL. ECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

RECORDS COORDINATOR PHONE NO. OFFICE NO. 638 96 (360) 664-6643 PAGE Business and Professions – Cosmetology RECORDS COORDINATOR CONTACT NAME Cameron Dalmae OFFICE NAME 240 Licensing
ADDRESS (MS or Street, City and ZIP Code) AGENCY

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Secretary of State PO Bo

Washington State Archives
Records Management Section
PO Box 40238
Olympia, WA 98504-0238
(360) 586-4901

REQUEST FOL ECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

RECORDS COORDINATOR PHONE NO. OFFICE NO. 638 DATE OF SUBMITTAL (360) 664-6643 5/17/10 10-06-62252 RECORDS OFFICER PHONE NO. (360) 359-4013 Business and Professions – Cosmetology 6 years RECORDS COORDINATOR CONTACT NAME INACTIVE E (Months in 3 if Records Contex) 60 months RECORDS OFFICER SIGNATURE (Required) I hereby gentify that I have completed an appraisal of the record series and examined this schedule for accuracy. Cameron Dalmas ACTIVE & Months In the Office In Off 12 months OFFICE NAME Date no longer active OPR Provides a record of a cosmetology, barber, manicure or esthetic school application documentation. Record series includes but is not limited to school application, floor plans, bond, correspondence, Title: COSMETOLOGY SCHOOL FILE ⊠ NEW ☐ REVISED ☐ TRANSFER ADDRESS (MS or Street, City and Zip Code) Licensing RECORDS OFFICER NAME Hannah Fultz AGENCY OFM NO. MS: 48026 240

renewals

DATE OF ACTION:		ENERGY FOR RECORDS WANAGEMENTSTAFF	
ACTION: Approved Returned to agency for further work	METER FORTHESTATEAUDITOR METER THE TORTHEATIORNEY GENERAL HENDERS HER BETTE OFFICE OF FINANCIAE MANAGEMENT NEW TORTHER TORTHE OFFICE OF FINANCIAE MANAGEMENT NEW TORTHER TORTHE OFFICE OF FINANCIAE MANAGEMENT NEW TORTHER TO	J.THORIZED RECORDS MANAGEMENT STAFF SIGNATURE—Forming revisions to title #description; increase in Records Center remition / reduction in order of the series discontinued and replaced by the State General Schedules, and office transfers.	

Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Washington State Archives Secretary of State

AGENCY OFM NO.

240

REQUEST FOR

ECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

OFFICE NAME

OFFICE NO.

RECORDS COORDINATOR PHONE NO. 638 DATE OF SUBMITTAL (360) 664-6643 Business and Professions - Cosmetology RECORDS COORDINATOR CONTACT NAME Cameron Dalmas ADDRESS (MS or Street, City and Zip Code) Licensing

RECORDS OFFICER PHONE NO.

(360) 359-4013 equired) //Fereby certify that I have completed an examined this schedule for accuracy. RECORDS OFFICER SIGNATURE (Required) appraisal of the record series and

RECORDS OFFICER NAME

12,

MS: 48026

5/17/10

TITLE: MONTHLY STUDENT REPORTS ⊠ NEW □ REVISED □ TRANSFER Hannah Fultz

10-06-62253 6 years 60 months 12 months Date of Report OFM Provides a record of student monthly hours of training. Records series includes but is not limited to student hour report

AND THE STATE ARCHIVIST. AUTHORIZED RECORDS MANAGEMENT STAFF. SIGNATURE: Forming revisions to title// description inclease in Records Centerretention freduction in the Control of the Control of the Cate Control of Centerretention freduction is sines discontinued and replaced by the State General Schedules, and office transfers. DATE OF ACTION: ECRITHEOFFICE OF FINANCIAL MANAGEMENT STATE RECORDS COMMITTEE// RECORDS MANAGEMENT STAFF ACTION □ Returned to agency for further work FOR THE ATTORNEY GENERAL FILE ☐ Approved FOR THE STATE AUDITOR ACTION:

III. OLD BUSINESS

A.1.b Tabled

Office 638, 611, 688, 685, 693, 666 (Business & Professions –Professional Licensing Support Department of Licensing Services)

Action: Motion to table items "Child Support Suspensions" and "Student Loan Default Suspensions" to combine into one series, "Professional License Ryser, seconded by Steenhout. Suspenstions"

Resolution: Motion carried.

Secretary of State

Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Washington State Archives

ECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REQUEST FOL

REFERENCE: RCW 40.14

OFFICE NAME

PAGE

638, 611, 688, 685, 693, 667 Business & Professions-Professional Licensing

RECORDS COORDINATOR CONTACT NAME Support Services

RECORDS COORDINATOR PHONE NO.

DATE OF SUBMITTAL

5/17/10

360 664-6643

RECORDS OFFICER PHONE NO. Cameron Dalmas

48051, 405 Black Lake Boulevard S.W., Olympia, 98502

RECORDS OFFICER NAME Hannah Fultz

ADDRESS (MS or Street, City and Zip Code)

Licensing

AGENCY OFM NO.

240

I bereby certify that I have completed an ed this schedule for accuracy. GNATURE (Required) Second series and examin RECORDS OFFICER

(360) 359-4013

Months in Records Center

appraisal of the

Provides documentation for suspension of a professional license due to non compliance with child support payments (RCW 18.16.240), or ☐ TRANSFER Title: PROFESSIONAL LICENSE SUSPENSIONS NEW ☐ REVISED ☐ DISCONTINUED

18.16.230). Record series includes but is not limited to Notice of due to non-compliance with student loan payments (RCW

notification of student loan payment default from a lending agency, suspension letter, resolution notices, and supporting documents. Suspension from the Department of Social and Health Services etters of license suspension to licensees from DOL, release of (DSHS) directing Department of Licensing (DOL) to suspend,

10-06-62254

1 year

0

12 months

Date of Resolution

OFM

Revision No. / Statement:

STATE RECORDS COMMITTEE / RECORDS MANAGEMENT STAFF ACTION

HENE FOR THE OFFICE OF FINANCIAL MANAGEMENT SERVICES ☐ Returned to agency for further work FOR THE ATTORNEY GENERAL Approved

ACTION:

FOR THE STATE AUDITOR

TELESTEOR RECORDS MANAGEMENT STAFFLESS MINISTRE

SE SE FOR THE STATE ARCHIVIST

DATE OF ACTION:

AUTHORIZED RECORDS MANAGEMENT STAFF. SIGNATURE For minor revisions to title // description, increase im Records Centerretention -/ reduction in office retention (no change to total) series discontinued and replaced by the State Generali Schedules, and office transfers

Secretary of State

AGENCY

AGENCY OFM NO.

240

Records Management Section Washington State Archives PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901

REQUEST FOR GECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40,14 OFFICE NAME

PAGE

RECORDS COORDINATOR PHONE NO. 638 DATE OF SUBMITTAL (360) 664-6643 5/17/10 RECORDS OFFICER PHONE NO. (360) 359-4013 Business and Professions – Cosmetology RECORDS COORDINATOR CONTACT NAME hereby certify that I have completed an Cameron Dalmas 6 for accuracy. RECORDS OFFICER SIGNATURE (Required) appraisal of the record series and exami ADDRESS (MS or Street, City and Zip Code Licensing RECORDS OFFICER NAME MS: 48026

INACTIVE (Months in acords Center) OPRIOFIN Title: COSMETOLOGY/MANICURIST/ESTHETICIAN/BARBER ☐ NEW ☐ REVISED ☐ DISCONTINUED ☐ TRANSFER Hannah Fultz

documentation of meeting including but not limited to recordings, Provides a record of board meeting minutes and associated ADVISORY BOARD MEETING INFORMATION agendas, minutes, meeting materials.

Minutes to Cosmetology/Manicurist/Esthetician/Barber Advisory Cosmetology/Manicurist/Esthetician/Barber/Instructor Board Board Meeting Information, changes the description to more accurately reflect series contents, changes from OFM, and changes the cutoff from Monthly to Date of Board Meeting. Revision No. / Statement: Revision 3 changes the title from

Date of Board Meeting OPR

12 months

60 months

6 years

Rev. 3

81-10-29085

ARCHIVAL

DATE OF ACTION: STATE RECORDS COMMITTEE/RECORDS MANAGEMENT STAFF ACTION

SECORTHEISTATE ARCHIVIST

FOR THE OFFICE OF FINANCIAL MANAGEMENT Returned to agency for further work FOR THE ATTORNEY GENERAL! □ Approved

FOR THE STATE AUDITOR

ACTION:

AND HEAVIFOR RECORDS MANAGEMENT STAFF AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: Forming revisions to tutle, descripton increase in Records Center retention, reduction in office retention (no charge to notal), series discontinued and replaced by the State General Schedules, and office transfers.

III. OLD BUSINESS

A.2 Tabled

University of Washington Any Office

Action: Motion to table items # 5-12 for further clarification. Ryser, seconded by

Handfield.

Resolution: Motion carried.

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Circulars

CIRCULAR A-110

Memoranda

REVISED 11/19/93

Privacy Guidance

As Further Amended 9/30/99

Reports

TO THE HEADS OF EXECUTIVE DEPARTMENTS AND ESTABLISHMENTS

SLARGH

SUBJECT:

Uniform Administrative Requirements for Grants and

Agreements With Institutions of Higher Education, Hospitals,

and Other Non-Profit Organizations

- 1. Purpose. This Circular sets forth standards for obtaining consistency and uniformity among federal agencies in the administration of grants to and agreements with institutions of higher education, hospitals, and other non-profit organizations.
- 2. Authority. Circular A-110 is issued under the authority of 31 U.S.C. 503 (the Chief Financial Officers Act), 31 U.S.C. 1111, 41 U.S.C. 405 (the Office of Federal Procurement Policy Act), Reorganization Plan No. 2 of 1970, and E.O. 11541 ("Prescribing the Duties of the Office of Management and Budget and the Domestic Policy Council in the Executive Office of the President").
- 3. Policy. Except as provided herein, the standards set forth in this Circular are applicable to all Federal agencies. If any statute specifically prescribes policies or specific requirements that differ from the standards provided herein, the provisions of the statute shall govern.

The provisions of the sections of this Circular shall be applied by Federal agencies to recipients. Recipients shall apply the provisions of this Circular to subrecipients performing substantive work under grants and agreements that are passed through or awarded by the primary recipient, if such subrecipients are organizations described in paragraph 1.

This Circular does not apply to grants, contracts, or other agreements between the Federal Government and units of State or local governments covered by OMB Circular A-102, "Grants and Cooperative Agreements with State and Local Governments," and the Federal agencies' grants management common rule which standardized and codified the administrative requirements Federal agencies impose on State and local grantees. In addition, subawards and contracts to State or local governments are not covered by this Circular. However, this Circular applies to subawards made by State and local governments to organizations covered by this Circular. Federal agencies may apply the provisions of this Circular to commercial organizations, foreign governments, organizations under the jurisdiction of foreign governments, and international organizations.

- 4. Definitions. Definitions of key terms used in this Circular are contained in Section ____2 in the Attachment.
- 5. Required Action. The specific requirements and responsibilities of Federal agencies and institutions of higher education, hospitals, and other non-profit organizations are set forth in this Circular. Federal agencies responsible for awarding and administering grants to and other agreements with organizations described in paragraph 1 shall adopt the language in the Circular unless different provisions are required by Federal statute or are approved by OM8.
- 6. OMB Responsibilities. OMB will review agency regulations and implementation of this Circular, and will provide interpretations of policy requirements and assistance to insure effective and efficient implementation. Any exceptions will be subject to approval by OMB, as indicated in Section _____4 in the Attachment. Exceptions will only be made in particular cases where adequate justification is presented.
- 7. Information Contact, Further Information concerning this Circular may be obtained by contacting the Office of Federal Financial Management, Office of Management and Budget, Washington, OC 20503, telephone (202) 395–3993.
- 8. Termination Review Date. This Circular will have a policy review three years from date of issuance.

exempted from disclosure pursuant to the Freedom of Information Act (5 U.S.C. 552) if the records had belonged to the Federal awarding agency.

- (g) Indirect cost rate proposals, cost allocations plans, etc. Paragraphs (g)(1) and (g)(2) apply to the following types of documents, and their supporting records: indirect cost rate computations or proposals, cost allocation plans, and any similar accounting computations of the rate at which a particular group of costs is chargeable (such as computer usage chargeback rates or composite fringe benefit rates).
 - (1) If submitted for negotiation. If the recipient submits to the Federal awarding agency or the subrecipient submits to the recipient the proposal, plan, or other computation to form the basis for negotiation of the rate, then the 3-year retention period for its supporting records starts on the date of such submission.
 - (2) If not submitted for negotiation. If the recipient is not required to submit to the Federal awarding agency or the subrecipient is not required to submit to the recipient the proposal, plan, or other computation for negotiation purposes, then the 3-year retention period for the proposal, plan, or other computation and its supporting records starts at the end of the fiscal year (or other accounting period) covered by the proposal, plan, or other computation.

- ___.53 Retention and access requirements for records.
- (a) This section sets forth requirements for record retention and access to records for awards to recipients. Federal awarding agencies shall not impose any other record retention or access requirements upon recipients.
- (b) Financial records, supporting documents, statistical records, and all other records pertinent to an award shall be retained for a period of three years from the date of submission of the final expenditure report or, for awards that are renewed quarterly or annually, from the date of the submission of the quarterly or annual financial report, as authorized by the Federal awarding agency. The only exceptions are the following.
 - (1) If any litigation, claim, or audit is started before the expiration of the 3-year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved and final action taken.
 - (2) Records for real property and equipment acquired with Federal funds shall be retained for 3 years after final disposition.
 - (3) When records are transferred to or maintained by the Federal awarding agency, the 3-year retention requirement is not applicable to the recipient.
 - (4) Indirect cost rate proposals, cost allocations plans, etc. as specified in paragraph ___.53(g).
- (c) Copies of original records may be substituted for the original records if authorized by the Federal awarding agency.
- (d) The Federal awarding agency shall request transfer of certain records to its custody from recipients when it determines that the records possess long term retention value. However, in order to avoid duplicate recordkeeping, a Federal awarding agency may make arrangements for recipients to retain any records that are continuously needed for joint use.
- (e) The Federal awarding agency, the Inspector General, Comptroller General of the United States, or any of their duly authorized representatives, have the right of timely and unrestricted access to any books, documents, papers, or other records of recipients that are pertinent to the awards, in order to make audits, examinations, excerpts, transcripts and copies of such documents. This right also includes timely and reasonable access to a recipient's personnel for the purpose of interview and discussion related to such documents. The rights of access in this paragraph are not limited to the required retention period, but shall last as long as records are retained.
- (f) Unless required by statute, no Federal awarding agency shall place restrictions on recipients that limit public access to the records of recipients that are pertinent to an award, except when the Federal awarding agency can demonstrate that such records shall be kept confidential and would have been

Mallery, Michele

From:

Barbara Benson [bbenson@u.washington.edu]

∋ent: To: Thursday, April 01, 2010 4:30 PM

To:

Mallery, Michele

Subject:

FW: Any Office re-check

And I just sent this to myself....here you go@

Barbara Benson, Director Records Management Services University Records Officer (206) 543-7950 Box 354910 www.washington.edu/admin/recmgt

From: Barbara Benson

Sent: Thursday, April 01, 2010 4:14 PM

To: Barbara Benson

Subject: RE: Any Office re-check

Hi Michele:

I think we got it for everything but maybe #10. I'm totally confused on that one, my descriptions seem to match. Lets talk about it tomorrow.

Jo to cut to the chase, I'm emailing the revised submission.

And I'm faxing you the approved schedule copy for #6.

Barb

Barbara Benson, Director Records Management Services University Records Officer (206) 543-7950 Box 354910 www.washington.edu/admin/recmgt

From: Barbara Benson

Sent: Friday, March 26, 2010 11:49 AM

To: 'Mallery, Michele'

Subject: RE: Any Office re-check

Hi Michele, this is turning into a rainbow I'll respond in another color.....lets go for purple....

Bottom line, I think we got it. I'll send you the revised submissions right now.

Sarb

Barbara Benson, Director Records Management Services University Records Officer (206) 543-7950 Box 354910 www.washington.edu/admin/recmgt

From: Mallery, Michele [mailto:michele.mallery@sos.wa.gov]

Sent: Wednesday, March 24, 2010 12:27 PM

To: Barbara Benson

Subject: Any Office re-check

Barb.

I have finally had a chance to review the email you submitted and compare to what we now have (thank you for the copies!).

I'll respond in Blue next to your responses. Once I receive a response/corrections, I will then assign the NEW DAN's.

Thank you again for being patient with our office!

Barb,

I am writing to you on behalf of the Washington State Archivist and would like to thank you for submitting the records retention schedules for the University of Washington Office Any Office dated March 15, 2010 which was received and reviewed by the Records Management Office on March 16, 2010.

I have reviewed the submitted schedule for Office Any Office and request the following corrections: For Items # 1 and 2 – Same retention, why not just one schedule? There really isn't a distinction between the two in the revision statements and/or titles

The goal here is to have the same retention period for issuing and receiving offices. The entry on the General Schedule is only listed once, but the copy holders are broken down into issuing and receiving, which is why we need the approval of the SRC on both copy holders....to get them to match.

So you are exactly right, there is only one series on the General Schedule. This is what it currently looks like:

Billing Source Documents for Grants/Contracts: Documentation used by UW Recharge/Cost/Service Centers to prepare Cost Transfer Invoices (CTIs), Internal Sales Documents (ISDs), recharge documents, journal vouchers, or invoices for the purpose of charging other budgets or non-UW entities for services or supplies. May describe in greater detail than billing document the service or supplies provided. May include work orders, service requests, logs of goods/services provided, etc.

Official Copy: Any Issuing Office Retention: 6 years after end of month

Disposition Method: Recycle

Other Copy: Any Receiving Office

cetention: 3 years after submission of final expenditure report

Disposition Method: Recycle

- I think to clarify this for the committee, if you could put in the revision statement for both, which is the primary copy and which is the secondary/other copy

had the same thought and did include language to that effect. I'll send you another copy with additional language and that part highlighted so its very clear.

3 -This is for the secondary copy correct?

Exactly so - Just making sure!

#4 – The description per schedule dated 06/01 is "Records of financial transactions on federal grants and contracts" It does not have "Including non FEC cost share documentation". After Packing slips the description is missing "From UW Store/Corporate Express" "Memo to Request an advance notice, etc (etc is missing). Does not have non-ProCard credit card slips, eProcurement invoices, or ProCard credit card statements". Retention is from 6 yrs to 3 yrs.

We revised the description between 06/01 and today. Don't know why you don't have a copy. Would you like me to make it a description revision as well? – Yes, since the description changed, please mention in revision statement. I also noticed from the copy you sent that it was OPR and this schedule has it as OFM, but nothing noted in the revision statement.

I'll take care of the language change.

I'm going to cut and paste the entry from the General Schedule to explain what happened here with OPR and OFM. This is a situation just like the Billing Source Documents. We use one description, but various offices have the official copy and some offices have secondary copies. When we revised the description, we did it once, for the OPR copy. However, the description applies to all copies....both OPR and OFM.

In this particular case, it's the OFM copy that we are revising, which is why the series I submitted is identified as OFM, not OPR.

Financial Records for Grants/Contracts: Records of financial transactions on grants and contracts including non-FEC (Faculty Effort Certification) cost share documentation. May include Budget Activity Reports (BARs), Budget Status Reports (BSRs), Cash Transmittals, Cost Transfer Invoices (CTIs), Journal Vouchers (JVs), vendor invoices, Purchase Requisitions, travel records, packing slips from Corporate Express, financial statements and reports of expenditures to sponsoring agencies, Requests for Authorized Recharges, Requests to Transfer Expenditures, Requests for Reverse Expenditures, TRANSPASU form, Memo to Request an Advance Notice, non-ProCard credit card slips, eProcurement invoices, or ProCard credit card statements.

Official Copy: Financial Services -- Paper CTIs/ISDs, Cash Transmittals, Vendor Invoices, Invoice Vouchers, Per Diem Advance Requests, Travel Expense Vouchers
Retention: 6 years after end of month
Disposition Method: Recycle

Official Copy: e-Commerce -- eCommerce invoices

Retention: 6 years after end of month

Disposition Method: Recycle

Official Copy: Grant and Contract Accounting -- Journal Vouchers, Expenditure Reports to sponsoring agencies, Requests for Authorized Recharges, Requests for Reverse Expenditures, Requests to Transfer Expenditures, BARs/BSRs, Cash Transmittals,

Memo to Request Advance Notice

Retention: 6 years plus 90 days after submission of final expenditure report

Disposition Method: Recycle

Official Copy: Purchasing -- Purchasing records

Retention: 6 years after file closed Disposition Method: Recycle

Official Copy: eCommerce -- ProCard Retention: 6 years after end of month

Disposition Method: Shred

Other Copy: College/School or Department

Retention: BAR/BSR/BSSR considered a duplicate; may be disposed of once they have served their reference purpose if not used for

oversight or reconciliation activity

Retention: All other records; 3 years after submission of final expenditure report

Disposition Method: Recycle

‡5 – Unable to locate in GS 7. I was able to locate Packing slips in GS 6, but not the same title. Do you have an approved copy you can send?

At the time, we were told by your office to use the same DAN since the series were identical except for the title. You'll remember the meeting you Russell, Andrea and I had a few years ago that covered this. For that reason I think of it as a revision, would you prefer I add it as a "New" series instead? – Since we are issuing DAN's for the UW's GS, let's go ahead and treat this as a NEW and I will assign a new DAN.

Terrific!

#6 - Per schedule dated 12/99 the retention is 3 yrs not 6 yrs

We revised this not too long ago. Would you like me to send you the signed, revised schedule? - Thank you for sending a copy. The cut off was "Submission of Final Expenditure Report" not "Termination of Funding Period" (per copy of schedule sent).

I must have sent you the wrong copy.....the approved revision I have in front of me says Termination of Funding Period. I'll send it along by fax this afternoon. In fact, I just figured out what happened. We revised this series twice in 2005. The 2nd and final approved revision has Term of Funding Period as the cut-off. It's the only series on the page and what I'm faxing now.

The first time we revised the series in 2005, the series was on the same page as #12, with the same cut-off. I think that confused both of us. For #12 you are right about the cut-off and I'll send you a corrected submission.

#7 – Per schedule dated 12/99 the retention is 3 yrs not 6 yrs. The description is missing after May include: "...supplemental time records (timesheets) to either the Form 220 or the PTR/ETR, etc.

Again, revised a few years ago. Would you like me to send you the signed, revised schedule? – Thank you for sending a copy of this. No errors

9 — This is for the secondary copy correct? Absolutely correct. — Just making sure.

10 – I have found in GS 06 – schedule dated 10/10/05 but do not have anything/retention for the secondary copy

This is actually the primary official copy, not the secondary. You should have something approved for it in section 07. – Ok.. for this one, the description is missing after Invoices received, and confirmation of receipt of goods, such as", the cut off is End of Month, Not Termination of Funding Period. (per copy of schedule sent)

Now I'm confused. That's not how the copy I have in my hand is reading. I'll call you about this one tomorrow.

11- This is for the secondary copy correct?

Absolutely correct - Just making sure.

12 – Per schedule dated 10/94 – The cut off is "After Date of Request". Description is "Requests routed within a department for internal approval of purchases prior to generation of a purchase requisition. May include correspondence or internal forms. (I located this in GS 06, not 07)

Again, there should certainly be a revised version with signatures in your file. Would you like my copy? - The Cut of firs Submission of Final Expenditure Report, not Termination of Funding Period. (per copy of schedule sent).

I'll take care of it....see #6

Please make the requested corrections and re-submit an electronic copy for review. Once corrected, I will assign NEW DAN's.

In the meantime, if you have any questions on the status of this schedule, please don't hesitate to contact me by email or telephone (360) 586-4901.

So I'll wait to hear back from you before I make any changes or send anything to you. I'm figuring we missed the April meeting, so May agenda here we come.

Let me know how you'd like me to handle all this. Barbara

Best Regards, **Michele Mallery**

State Government Records Management Specialist Washington State Archives
Iffice of the Secretary of State
Washington Street SE; MS: 40238
Olympia, WA 98504

[Please note new email address] Michele.Mallery@sos.wa.gov

Phone: 360-586-4901 Fax: 360-586-0368

To receive updates on records management advice, records retention schedules and training, click on the following link:

http://www.sos.wa.gov/archives/RecordsManagement/records_state.aspx

Learn more about the Washington State Archives

Review the State Records Committee Minutes Review the Local Records Committee Minutes

From: Barbara Benson [mailto:bbenson@u.washington.edu]

Sent: Tuesday, March 16, 2010 8:30 AM

To: Mallery, Michele

Subject: RE: record series for SRC review

Hi Michele:

I would truly love DANs for the UW GS numbers. Please do feel free to assign them. I wanted to give you what we had in the hopes of making it easier to look up the last revision. I'm ready for anything that comes up@ barb

Barbara Benson, Director **Records Management Services** University Records Officer (206) 543-7950 Box 354910 www.washington.edu/admin/recmgt

From: Mallery, Michele [mailto:michele.mallery@sos.wa.gov]

Sent: Tuesday, March 16, 2010 8:03 AM

To: Barbara Benson

Subject: RE: record series for SRC review

Barb.

Just a quick question before I dig into these..... Shouldn't we assign a DAN to the UW GS numbers? I thought that's what we decided? Let me know! I will start checking these in a minute compared to what I have in the drawer and I will let you know if any corrections are needed.

Best Regards, Michele Mallery

State Government Records Management Specialist Washington State Archives Office of the Secretary of State 1129 Washington Street SE; MS: 40238 Olympia, WA 98504

[Please note new email address] Michele.Mallery@sos.wa.gov

Phone: 360-586-4901 Fax: 360-586-0368

To receive updates on records management advice, records retention schedules and training, click on the following link:

http://www.sos.wa.gov/archives/RecordsManagement/records_state.aspx

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Review the State Records Committee Minutes
Review the Local Records Committee Minutes

From: Barbara Benson [mailto:bbenson@u.washington.edu]

Sent: Monday, March 15, 2010 4:47 PM

To: Mallery, Michele

Subject: record series for SRC review

Hi Michele:

Attached are 13 record series for SRC review. I'd like to get them in for the April SRC meeting if that's at all possible, but if you can't I'll let the process owner know.

The first 12 series are revisions and the 13th is a new series. These are all record series found in Section 07 of our General Records Retention Schedule. They apply to any office at the UW who has a federal grant or contract. You can see the series as they currently exist at: http://f2.washington.edu/fm/recmgt/retentionschedules/gs/general/uwgs7

At the request of our Grant and Contract Accounting Office who is the process owner for these records, we are requesting approval for these series. GCA feels strongly we should be in exact compliance with the Federal government rules regarding the management of financial records relating to grants and contracts. The Feds don't see a difference between OFM and OPR, so you'll notice that all these series have the same cut-off and same retention regardless of whether they are OFM or OPR.

This is a major overhaul of the financial records in section 07 of our retention schedule.

If you have any questions, please just email me directly. I know this is a controversial and complicated revision and I think it will be easier if I just handle it myself rather than delegate it to Andrea like usual.

I'm also including the Federal rules that we cite as the reason for this revision so the SRC can look at the language we are trying to be in compliance with. These rules are written by the Office of Management of Budget and apply specifically to Higher Education, Hospitals and Non-Profits. If you want to see the whole document, here is the link: http://www.whitehouse.gov/omb/circulars_al10/

The section that we are citing is below. I bolded the bit that refers to us. All our awards are renewed quarterly or most often annually.

Happy to answer any questions that may arise.

Take care, Barb

- ___.53 Retention and access requirements for records.
- (a) This section sets forth requirements for record retention and access to records for awards to recipients. Federal awarding agencies shall not impose any other record retention or access requirements upon recipients.
- (b) Financial records, supporting documents, statistical records, and all other records pertinent to an award shall be retained for a period of three years from the date of submission of the final expenditure report or, for awards that are renewed quarterly or annually, from the date of the submission of the quarterly or annual inancial report, as authorized by the Federal awarding agency. The only exceptions are the following.

- (1) If any litigation, claim, or audit is started before the expiration of the 3-year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved and final action taken.
- (2) Records for real property and equipment acquired with Federal funds shall be retained for 3 years after final disposition.
- (3) When records are transferred to or maintained by the Federal awarding agency, the 3-year retention requirement is not applicable to the recipient.
- (4) Indirect cost rate proposals, cost allocations plans, etc. as specified in paragraph ___.53(g).
- (c) Copies of original records may be substituted for the original records if authorized by the Federal awarding agency.
- (d) The Federal awarding agency shall request transfer of certain records to its custody from recipients when it determines that the records possess long term retention value. However, in order to avoid duplicate recordkeeping, a Federal awarding agency may make arrangements for recipients to retain any records that are continuously needed for joint use.
- (e) The Federal awarding agency, the Inspector General, Comptroller General of the United States, or any of their duly authorized representatives, have the right of timely and unrestricted access to any books, documents, papers, or other records of recipients that are pertinent to the awards, in order to make audits, examinations, excerpts, transcripts and copies of such documents. This right also includes timely and reasonable access to a recipient's personnel for the purpose of interview and discussion related to such documents. The rights of access in this paragraph are not limited to the required retention period, but shall last as long as records are retained.
- Dunless required by statute, no Federal awarding agency shall place restrictions on recipients that limit public access to the records of recipients that are pertinent to an award, except when the Federal awarding agency can demonstrate that such records shall be kept confidential and would have been exempted from disclosure pursuant to the Freedom of Information Act (5 U.S.C. 552) if the records had belonged to the Federal awarding agency.
- (g) Indirect cost rate proposals, cost allocations plans, etc. Paragraphs (g)(1) and (g)(2) apply to the following types of documents, and their supporting records: indirect cost rate computations or proposals, cost allocation plans, and any similar accounting computations of the rate at which a particular group of costs is chargeable (such as computer usage chargeback rates or composite fringe benefit rates).
- (1) If submitted for negotiation. If the recipient submits to the Federal awarding agency or the subrecipient submits to the recipient the proposal, plan, or other computation to form the basis for negotiation of the rate, then the 3-year retention period for its supporting records starts on the date of such submission.
- (2) If not submitted for negotiation. If the recipient is not required to submit to the Federal awarding agency or the subrecipient is not required to submit to the recipient the proposal, plan, or other computation for negotiation purposes, then the 3-year retention period for the proposal, plan, or other computation and its supporting records starts at the end of the fiscal year (or other accounting period) covered by the proposal, plan, or other computation

University Records Officer (206) 543-7950 Box 354910 www.washington.edu/admin/recmgt

Best Regards, Michele Mallery

State Government Records Management Specialist Washington State Archives Office of the Secretary of State 1129 Washington Street SE; MS: 40238 Olympia, WA 98504

[Please note new email address] Michele.Mallery@sos.wa.gov

Phone: 360-586-4901 Fax: 360-586-0368

To receive updates on records management advice, records retention schedules and training, click on the following link:

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REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

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RECORDS COORDINATOR PHONE NO. DESIGNATION/REMARKS OFFICE NO. DATE OF SUBMITTAL April 5, 2010 543-0573 DISPOSITION AUTHORITY NO. (DAN) 19-05-62190 10-05-62188 RECORDS OFFICER PHONE NO. 543-7950 TOTAL (Years) ന ന RECORDS COORDINATOR CONTACT NAME INACTIVE (Months in Records Cente RETENTIO 38 38 Andrea Watts Any office OFFICE NAME 0 0 Submission of Financial Status Report Submission of Financial Status CUT-OFF Report OPR/OFM RECORDS OFFICER SIGNATO appraisal of the record separations and the record separations are separations. OFM OPR Provides a record of Procurement Card (ProCard) transaction approval, reconciliation, and receipt of goods or equipment. Includes reviewed and signed Transaction Detail Report, invoices received, and packing slips. Revision No. / Statement — This revision is for the copy held by the College/School or Department who receives a grant/contract. Phis revision changes the cut-off from "End of Month". The revision brings these documents into compliance with OMB-Circular A-110. These revisions are made with the full approval of the UW Office of Internal Audit and Research Accounting and Analysis: Grant and Contract Accounting Office. The Payroll Office is responsible for the OPR copy of these records.. A record certifying the number of hours worked by each hourly and student employee on a particular budget during a particular pay period. Revision No. / Statement – This revision is for the copy held by the College/School or Department who receives a grant/contract. This revision changes the cut-off from grant/contract. This revision changes the cut-off from period from 6 years. The revision brings these documents into compliance with OMB Circular A-110 which is attached. These revisions are made with the full approval of the UW Office of internal Audit and Research Accounting and Analysis: Grant and Contract Accounting Office. NEW X REVISED ☐ TRANSFER NEW X REVISED TRANSFER University of Washington itte: Positive Time Reports (PTR) Title: ProCard Approvals ADDRESS (MS or Street, City and Zip Code) STATUS / TITLE / DESCRIPTION RECORDS OFFICER NAME Barbara Benson Box 354910 AGENCY OFM NO. Ēŏ. 9

	DATE OF ACTION:	FOR THE STATE ARCHIVIST	n FOR RECORDS MANAGEMENT STAFF
STATE RECORDS COMMITTEE / RECORDS MANAGEMENT STAFF ACTION	ACTION: Approved Returned to agency for further work	FOR THE STATE AUDITOR	AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE. For minor revisions to title // description, increase in Records Center retention / reduction in office retention (no change to total), series discontinued and replaced by the State General Schedules, and office transfers.

Secretary of State

Washington State Archives
Records Management Section
PO Box 40238
Olympia, WA 98504-0238
(360) 586-4901

REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REFERENCE: RCW 40.14

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REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REFERENCE: RCW 40.14

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REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER
REFERENCE: RCW 40.14

PAGE 1 OF 6

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Washington State Archives Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901

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REFERENCE: RCW 40.14

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RECORDS COORDINATOR PHONE NO. ARCHIVAL DESIGNATION/REMARKS OFFICE NO. DATE OF SUBMITTAL April 5, 2010 543-0573 DISPOSITION AUTHORITY NO. RECORDS OFFICER PHONE NO. 543-7950 TOTAL (Years) ന ന RECORDS COORDINATOR CONTACT NAME INACTIVE (Months in Records Center) I have completed an 36 36 Andrea Watts Any office ACTIVE (Months in Office) OFFICE NAME 0 0 of Financial Status Report of Financial Status Report Submission Submission CUT-OFF RECORDS OFFICER SIGNATURE (Red OPRIOFM OPR OPR appraisal of the record Revision No. / Statement — This revision is for the copy held by the College/School or Department who receives a grant/contact. This revision changes the cut-off from "End of the Calendar Year", and reduces the retention period from 6 years, and modifies the description by removing, "May include Retroactive Salary Transfer Form". The revision brings these documents into compliance with OMB Circular A-110 which is attached. These revisions are made with the full approval of the UW Office of Internal Audit and Research Accounting and Analysis: Grant and Contract Accounting Office. Revision No. / Statement — This revision is for the copy held by Any Office who receives a grant/contact. This revision changes the cut-off from "Termination of Funding Period", and reduces the retention period from 6 years. The revision brings these documents into compliance with OMB Circular A-110 which is attached. These revisions are made with the full approval of the UW Office of Internal Audit and Research Accounting and Analysis: Grant and Contract Accounting Office. Records of expenditure from a grant or contract revolving fund. May include Application for Revolving Fund; Petty Cash Vouchers with supporting documents such as sales slips, cash register receipts; paid invoices; Receipt for Petty Cash Advance; bank records such as deposit tickets, canceled checks, statements, reconciliations, study subject compensation records, etc. Provide record of hours worked by grant/contract funded employees. ☐ NEW X REVISED ☐ TRANSFER Title: Petty Cash (Revolving Fund) Records ☐ NEW X REVISED ☐ TRANSFER Title: Payroll Records for Grants/Contracts University of Washington ADDRESS (MS or Street, City and Zip Code) STATUS / TITLE / DESCRIPTION AGENCY RECORDS OFFICER NAME Barbara Benson Box 354910 AGENCY OFM NO. E Se

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ACTION:	FOR THE STATE AUDITOR		AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revi
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IV. ACTION ITEMS
A.1. Washington State University

PAGE REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER
REFERENCE: RCW 40.14 OFFICE NAME Washington State Archives Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Secretary of State AGENCY OFM NO. AGENCY

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IV. ACTION ITEMS A.2. Board of Accountancy

Records Management Section Washington State Archives PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901

REQUEST F. RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

OF 1 OFFICE NO. PAGE

RECORDS COORDINATOR PHONE NO. 100 DATE OF SUBMITTAL 360-664-9194 5/7/10 72-09-02228 RECORDS OFFICER PHONE NO. 360-586-0952 6 Months RECORDS COORDINATOR CONTACT NAME **Board of Accountancy** hereby certify that I have completed an 0 Cheryl Sexton ed this schedule for accuracy. OFFICE NAME ഗ Accepted by the Board Grades Required OFM RECORDS OFFICER SIGNA appraisal of the record se grade files received from exam vendor, summary report and exceptions for tests administered to qualify candidates for license as Electronic grade files received from exam vendor, summary reports, candidate files and exceptions for tests administered to qualify are entered into a maintained computer database." Changing cut-off date from "Entered into database" to "Grades accepted by the Board." Change retention from 36/0/3 to 6/0/6. Revision No. / Statement Rev 3 Changing description from "Electronic administered to qualify candidates for license as a CPA. All grades candidates for license as a CPA. All grades are entered into a a CPA" to "Electronic grade files received from exam vendor, 711 Capitol Way S Suite 400, Olympia, WA, 98501 summary reports, candidate files and exceptions for tests **Board of Accountancy** □ NEW NREVISED TRANSFER maintained computer database. ADDRESS (MS or Street, City and Zip Code) Title: Uniform CPA Exam RECORDS OFFICER NAME Jennifer Sciba AGENCY OFM NO. ES. 165

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	DATE OF ACTION:	TANDESTATE!	MANAGEMENTISTATE
ECORDS:COMMITTEE//RECORDS/MANAGEMENT/STAFF/ACTION	d to agency for further work	ORNEX GENERALISMES AND THE OFFICE OF FINANCIAL MANAGEMENT WITH THE	minor revisions to title / description, increase in Records Center retention/reduction by the State General Schedules and office transfers
	☐ Approved	й≽⊪ жатж∭ түүү жан боктиЕАт	SEMENT STAFF SIGNATURE: For all series discontinued and replaced
	ACTION:	AND TOR THE STATE AUDITOR	AUTHORIZED RECORDS MANAG

IV. ACTION ITEMS
A.3. Department of Financial Institutions

Washington State Archives Secretary of State

Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901

REQUEST FC. RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

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PAGE 1

RECORDS COORDINATOR PHONE NO. ARCHIVAL PESIGNATION/REMARKS OFFICE NO. 500 DATE OF SUBMITTAL 360-664-7845 4/26/10 DISPOSITION
AUTHORITY NO.
(DAN) 07-06-61534 Revision 1 RECORDS OFFICER PHONE NO. 360-902-8820 TOTAL (Years) ဖ Consumer Services Division RECORDS COORDINATOR CONTACT NAME INACTIVE (Months in Records Center) RETENTION RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an appraisal of the record series and examined this schedule for accuracy. 9 ACTIVE (Months in Office) Kim Hoss 7 OFFICE NAME CUT-OFF Closed OPR/OFM OPR Springs of Title revised to cover all individual license types. Absorb series 99-04-59060. The cut off has changed from calendar year. The retention has changed from 24/48/6 License app and supporting documentation for individuals who surrendered or abandoned their apps or had their apps Title: Consumer Services Individuals License Files and Abandoned, Rejected. Denied or Withdrawn 102 Bepartment of Financial Institutions
ADDRESS (MS or Street, City and Zip Code) 150 Israel Rd SW Tumwater, WA 98501 ☐ NEW NEVISED TRANSFER STATUS/TITLE/DESCRIPTION AGENCY Applications* RECORDS OFFICER NAME Gloria Papiez denied. AGENCY OFM NO. 14 N

STATE RECORDS COMMITTEE/ RECORDS, MANAGEMENT STAFF ACTION	NT STAFF ACTION	
ACTION: Approved Returned to agency for further work	ther work DATE OF ACTION:	ACTION:
FOR THE STATE AUDITOR: FOR THE ATTORNEY GENERAL: FOR THE OF	FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title / description, increase in Records Center retention / reduction of the retention for change to total / series discontinued and replaced by the State General Schedules, and office transfers.	anter retention / reduction	FOR RECORDS MANAGEMENT STAFF
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IV. ACTION ITEMS A.4. Washington State Lottery

RECORDS COORDINATOR PHONE NO. OFFICE NO. ARCHIVAL DESIGNATION/REMARKS 450 DATE OF SUBMITTAL archival P 5/19/2010 360.664.4793 PAGE DISPOSITION AUTHORITY NO. (DAN) 91-11-49445 RECORDS OFFICER PHONE NO. REQUEST FOR RECORDS RETENTION SCHEDULE 360.664,4790 AND DISPOSITION AUTHORITY NUMBER TOTAL (Years) 30 RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 RETENTION RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an appraisal of the record series and exemined this schedule for accuracy. 288 Communications Jerry Jansen OFFICE NAME 72 Calendar Year CUT-OFF OPRIOFIN OPR photographs and other pertinent Lottery records. It includes Mega Millions and Powerball annuities spread over 30 years.
Revision No. / Statement #3. Change division from Marketing 400 to Communications 450. Change Record Center storage 240 months to 288 months. Total retention from 26 years to 30 years. Include in the description "Includes Mega Millions and Powerball annuities spread over 30 years". information, retailer location, etc., and documentation for use in PR Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Washington State Archives Provides Lotto jackpot winner names, addresses, pertinent articles, survey of winners, release forms for news stories, 814 E 4th Ave., Olympia WA 98506 □ NEW SREVISED TRANSFER WA ST Lottery Secretary of State ADDRESS (MS or Street, City and Zip Code) Title: JACKPOT WINNERS STATUS/TRLE/DESCRIPTION AGENCY **Bruce Eisentrout** RECORDS OFFICER NAME AGENCY OFM NO. 0116 TEW S

	STATE RECORDS COMMITTEE / RECORDS MANAGEMENT STAFF ACTION	
ACTION:	☐ Approved ☐ Returned to agency for further work ☐ DATE	DATE OF ACTION:
FOR THE STATE AUDITOR	FOR THE ATTORNEY GENERAL, FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For mino in office refention (no change to total) series discontinued and replaced by its	UTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title / description, increase in Records Center retention / reduction	FOR RECORDS MANAGEMENT STAFF

IV. ACTION ITEMS
A.5. Washington State Liquor Control Board

May 13, 2010

Rac'd

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Selection Sections of American Section (Section Section Sectio

Records Committee PO Box 40238 Olympia, WA 98504-0238

Records Committee,

Attached, please find an update for Office 435. The previous Unique made mention of a report which is no longer generated as well as failed to mention employees entering and departing the building. We are also adding a Unique for office 430; Monitoring Reports as there is no logical General Schedule DAN for these reports which document our Alarm systems activity.

Please feel free to contact me if you have any questions.

Sincerely,

Stacii McKeon

Records Management Supervisor

WSLCB

3000 Pacific Ave SE

Olympia, WA 98504-3080

(360) 664-1693

REQUEST F Records Management Section PO Box 40238 Olympia, WA 98504-0238 Washington State Archives (360) 586-4901 Secretary of State

RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW. 40.14

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RECORDS COORDINATOR PHONE NO. ARCHIVAL TO DESIGNATION REMARKS OFFICE NO. 435 OF DATE OF SUBMITTAL 5/10/2010 360-664-1693 DISPOSITION AUTHORITY NO 80-01-24112 RECORDS OFFICER PHONE NO. 360-664-1693 Q RECORDS COORDINATOR CONTACT NAME Months In Records Center) Distribution Center (DC) RETENTION RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an about sail of the record series and examined this schedule for accuracy. 0 Stacii McKeon ACTIVE (Months In Office) 24 OFFICE NAME Fiscal Year OPR/OFM OF! employees who enter and depart the warehouse outside of their whose main office is at a different location. Also includes a daily log non-employees who enter and depart the warehouse as well as Revision No. / Statement REV 1 - Change description to "Report of regularily scheduled hours, or those whose main office is at a different focation. Also includes a daily log for each security guard shift, including but not limited to, time assuming duty, for each security guard shift, including but not limited to, time assuming duty, work completed during shift and time shift ended. Washington State Liquor Control Board warehouse outside of their regularily scheduled hours, or those Description: Report of non-employees who enter and depart the warehouse as well as employees who enter and depart the TRANSFER TILE: SECURITY ACTIVITY LOG & BUILDING SIGN IN 3000 Pacific Ave SE, Olympia WA 98504 ☐ NEW S REVISED ☐ DISCONTINUED STATUS/TITLE/DESCRIPTION ADDRESS (MS or Street, City and Zip Code) RECORDS OFFICER NAME Stacii McKeon AGENCY OFM NO. M Q 195

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Washington State Archives Secretary of State

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Records Management Section PO Box 40238 Olympia, WA 98504-0238 360) 586-4901

RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REQUEST

REFERENCE: RCW 40.14

PAGE 11

RECORDS COORDINATOR PHONE NO. 70F | 1 OFFICE NO. 430 DATE OF SUBMITTAL 5/11/2010 360-664-1693 10-06-62221 RECORDS OFFICER PHONE NO. 360-664-1693 RECORDS COORDINATOR CONTACT NAME Distribution Center (DC) OFFICER SIGNATURE (Required) I hereby certify that I have completed an Ito the record, series and examined this schedule for accuracy. 0 Stacii McKeon Months In Office) 2 OFFICE NAME Fiscal Year OFM determine which stores have high false alarm activity and to monitor problem stores. Description: Daily reports from Alarm Monitoring Computer for Managers as well as Daily Alarm Reports from Alarm Monitoring PC for false alarms. These reports are used to monitor workloads and monitor impacts on those workloads. They are also used to Washington State Liquor Control Board 43000 Pacific Ave SE, Olympia WA 98504 ☐ REVISED ☐ TRANSFER Title: MONITORING REPORTS ADDRESS (MS or Street, City and Zip Code) RECORDS OFFICER NAME Stacii McKeon M NEW AGENCY OFM NO.

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Revision No. / Statement

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IV. ACTION ITEMS A.6. Department of Health

Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Washington State Archives

REQUEST FC., RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

OFFICE NO. 占 PAGE

ARCHIVAL: JESIGNATION/REMARKS RECORDS COORDINATOR PHONE NO. 422 MITTAL Center for Health Statistics - Death with Dignity Act RECORDS COORDINATOR CONTACT NAME OFFICE NAME Department of Health ADDRESS (MS or Street, City and Zip Code) AGENCY RECORDS OFFICER NAME Sid McAlpin AGENCY OFM NO. MS-47856 STA TEM NO. 303

360,236,4308	DATE OF SUBI		
	RECORDS OFFICER PHONE NO.	360-236-3911	通りはまっている。
Rachel McKinlay	RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an appraisal of the record series and examined this schedule for accuracy.		Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1. Section 1.

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DISPOSITION AUTHORITY NO.) (DAN)	10-06-62235	
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ACTIVE (Months in Office)	72	
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STATUS/JTILE/DESCRIPTION	NEW ☐ REVISED ☐ TRANSFER Title: Death with Dignity Act (DWDA) Annual Statistical Report Data Description: As required by RCW 70.245.150(3), the Department of Health shall generate and make available to the public an annual statistical report of data collected from the required compliance forms. The information presented in this report is limited to items with sufficient numbers in a reporting field to ensure that confidentiality is protected. The report is published annually on the department's website as an Adobe Acrobat Document.	

Archival

	website as an Adobe Acrobat Document. Revision No. / Statement		
i	NEW □ REVISED □ TRANSFER Title: Death with Dignity Act (DWDA) Data description: Transitory web-based data. The Department of Health publishes data on the types and quantities of forms received under the Death with Dignity Act on the department's web page (http://www.doh.wa.gov/dwda/formsreceived.htm). This data is updated on a routine basis. A screen shot is taken of each web page update and stored on a shared network drive.	OFM	DATE OF DOCUMENT

10-06-62236

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RCW 70.245,150

Reporting of information to the department of health — Adoption of rules — Information collected not a public record — Annual statistical report.

- (1)(a) The department of health shall annually review all records maintained under this chapter.
- (b) The department of health shall require any health care provider upon writing a prescription or dispensing medication under this chapter to file a copy of the dispensing record and such other administratively required documentation with the department. All administratively required documentation shall be mailed or otherwise transmitted as allowed by department of health rule to the department no later than thirty calendar days after the writing of a prescription and dispensing of medication under this chapter, except that all documents required to be filed with the department by the prescribing physician after the death of the patient shall be mailed no later than thirty calendar days after the date of death of the patient. In the event that anyone required under this chapter to report information to the department of health provides an inadequate or incomplete report, the department shall contact the person to request a complete report.
- (2) The department of health shall adopt rules to facilitate the collection of information regarding compliance with this chapter. Except as otherwise required by law, the information collected is not a public record and may not be made available for inspection by the public.
- (3) The department of health shall generate and make available to the public an annual statistical report of information collected under subsection (2) of this section.

[2009 c 1 § 15 (Initiative Measure No. 1000, approved November 4, 2008).]

AGENCY OFM NO.

303

Washington State Archives
Records Management Section
PO Box 40238
Olympia, WA 98504-0238
(360) 586-4901

REQUEST FO_ RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

RECORDS COORDINATOR PHONE NO. OFFICE NO. 422 P 360.236.4308 PAGE Center for Health Statistics – Death with Dignity Act Rachel McKinlay OFFICE NAME Department of Health ADDRESS (MS or Street, City and Zip Code)

Ĕ	MS-47856				Rachel McKinlay	inlay			360.236,4308	
<u> </u>	RECORDS OFFICER NAME	RECORDS OFFICER S appraisal of the rec	SIGNATURE record series	(Required) I herel and examined this	iIGNATURE (Required) I hereby certify that I have completed an ord series and examined this schedule for accuracy.	s completed an acy.	RECORDS	RECORDS OFFICER PHONE NO.	DATE OF SUBMITTAL	
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	Title: Death with Dignity Act (DWDA) Compliance Forms Description: All DWDA administratively required documentation is	rms nentation is								-
	mailed to the Department of Health in paper format. Required	quired)4	-				
	documentation includes the patient's Request for Medication to End	cation to End							MANUFACTOR OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF	
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	I he forms are kept to insure compliance, and to generate and make	ate and make								
	available to the public an annual statistical report of the information	Information				e				f_diù
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	information collected is not a public record and may not be made	t be made							i p	dent'
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ACTION:	☐ Approved	ed Returned to agency for further work DATE OF	DATE OF ACTION:
FORTHESTATE AUDITOR	FOR	FOR THE ATTORNEY GENERAL	FOR THE STATE ARCHIVIST
			in dynamysta.
			FOR RECORDS MANAGEMENT STAFF
Aut HORIZED RECORDS MANAGEMENT STAFF SIGNATURE: Forming revisit in office-retention (no change to total), series discontinued and replaced by the State	EN STAFF SIGNATURE	:: For minor revisions to title? description, increase in Recolds Center Retention, reduction # page 10 to the State General Schedules, and office transfers.	Anna A

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Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Washington State Archives

RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REQUEST FC

REFERENCE: RCW 40.14

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PAGE

RECORDS COORDINATOR PHONE NO. OFFICE NO. 422 DATE OF SUBMITTAL 360,236,4308 Center for Health Statistics - Death with Dignity Act RECORDS OFFICER PHONE NO. RECORDS COORDINATOR CONTACT NAME Rachel McKinlay OFFICE NAME Department of Health ADDRESS (MS or Street, City and Zip Code) AGENC AGENCY OFM NO. MS-47856

ARCHIVAL DESIGNATIONREMARKS DISPOSITION SAUTHORITY/NO 10-06-62237 360-236-3911 TOTAL (Years) ო INACTIVE (Months in Records Center) RETENTION RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an appraisal of the record series and examined this schedule for accuracy. 0 36 CASE CLOSED CUT-OFF OPROFIN OFM participant is entered into an electronic data base for the purpose of analysis and to insure compliance. This database is stored on a for analysis purposes. Personal identifiers are included in the data base as well as information about health care providers and health care facilities. The information is confidential by law and is not available for inspection by the public (RCW 70.245,150). information must be retained over time for tracking compliance and Personal Identifiers
Description: Information collected on DWDA paper forms for every Title: Death with Dignity Act (DWDA) Electronic Database With network drive in an encrypted, password protected folder. The NEW □ REVISED □ TRANSFER STATUS / TILE / DESCRIPTION Revision No. / Statement RECORDS OFFICER NAME Sid McAlpin NON N

	SINEW □ REVISED □ TRANSFER	
	Title: Death with Dignity Act (DWDA) Electronic Database	
	Without Personal Identifiers	
	Description: De-identified information collected on the DWDA paper	
	forms for every participant is entered into an electronic data base for	-
	the purpose of analysis. This database is stored on a network drive in	
က	an encrypted, password protected folder. The information must be	OFIM
	retained for comparison and analysis over time. Information collected	
	on these forms include, but is not limited to age, race, relevant	
	medical information, mental status, dates, and place of residence.	
	Per RCW 70,245.150 the information collected is not a public record	
	and may not be available for inspection by the public.	
	Revision No / Statement	

10-06-62238

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CASE CLOSED

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Washington State Department of Health 2009 Death with Dignity Act Report

Executive Summary

Washington's Death with Dignity Act allows terminally ill adults seeking to end their lives in a humane and dignified manner to request lethal doses of medication from medical and osteopathic physicians. These terminally ill patients must be Washington residents who have six months (180 days) or less to live. In this report, a participant of the act is defined as someone to whom medication was dispensed under the terms of this law. This report focuses on the 63 participants for whom medication was dispensed between March 5, 2009, when the act became law, and December 31, 2009. It includes data from the documentation received by the Department of Health as of February 3, 2010.

Medication was dispensed to 63 individuals:

- Prescriptions were written by 53 different physicians
- Prescriptions were dispensed by 29 different pharmacists

Of the 63 people to whom medication was dispensed:

- 47 individuals have died
 - 36 of these people died after ingesting the medication
 - Seven of these people died without having ingested the medication
 - For the remaining four people who died, ingestion status is unknown
- Status is unknown for the remaining 16 people

Of the 47 participants who have died, their characteristics and underlying illnesses include:

- Age range, between 48 and 95 years
- 94 percent lived west of the Cascades
- 79 percent had cancer
- 9 percent had neuro-degenerative disease, including Amyotrophic Lateral Sclerosis (ALS)
- 12 percent had respiratory disease or other illnesses
- 89 percent had private, Medicare or Medicaid insurance

Of the 47 participants who have died, Death Certificates were received for 41 of these individuals; their characteristics include:

- 98 percent were white, non-Hispanic
- 46 percent were married
- 61 percent had some college education

Of the 47 participants who have died, After Death Reporting Forms were received for 44 of these individuals; their end-of-life concerns include:

- All were concerned about loss of autonomy, 82 percent about loss of dignity, and 91 percent about losing the ability to participate in activities that made life enjoyable
- Of the 36 participants who ingested the medication and died:
 - 94 percent were at home and 72 percent were enrolled in hospice care when they ingested the medication
 - Complications of ingesting the medication were reported in three individuals
 - Emergency Medical Services (EMS) were not called for any intervention after ingestion of the medication; EMS was called to pronounce death for two participants

Overview of Death with Dignity Act

The Washington State Death with Dignity Act (RCW 70.245) was passed by voter initiative on November 4, 2008 and became law on March 5, 2009. The law allows terminally ill adults seeking to end their lives in a humane and dignified manner to request lethal doses of medication from medical and osteopathic physicians. These terminally ill patients must be Washington residents who have an estimated six months (180 days) or less to live. More information on the Death with Dignity Act is available on the Department of Health's Web site (www.doh.wa.gov/dwda).

Role of Department of Health in Monitoring Compliance with the Act

To comply with the act, attending physicians and pharmacists must file documentation with the Department of Health. Patient eligibility for participation in the act must be confirmed by two independent physicians (an attending physician and a consulting physician). Within 30 days of a prescription being written for medication under this act the attending physician must file the following forms with the Department of Health:

- 1. Written Request for Medication to End Life Form (completed by the patient)
- 2. Attending Physician Compliance Form (completed by the attending physician)
- 3. Consulting Physician Compliance Form (completed by the consulting physician)

A psychiatric or psychological evaluation is not required under the terms of the law. However, if the attending or consulting physician requests an evaluation, the psychiatrist or psychologist must complete a Psychiatric/Psychological Consultant Compliance Form and the attending physician must file this form within 30 days of writing the prescription.

If the attending or consulting physician (or the psychiatrist or psychologist, if a referral is made) determines that a patient does not meet the qualifications to receive a prescription for medication under RCW 70.245, no forms have to be submitted to the Department of Health.

Within 30 days of dispensing medication, the dispensing pharmacist must file a Pharmacy Dispensing Record Form.

Within 30 days of a qualified patient's death from ingestion of a lethal dose of medication obtained under the act, or death from any cause, the attending physician must file an Attending Physician After Death Reporting Form.

To receive the immunity protection provided by RCW 70.245, physicians and pharmacists must make a good faith effort to file required documentation in a complete and timely manner.

Under Washington state law, a Death Certificate must be completed within 72 hours of death of an individual and filed with the local health agency where the death occurred. Local health agencies hold Death Certificates for 30 to 60 days before filing them with the state Department of Health. As a result, the state health department may receive an After Death Reporting Form before the Death Certificate is filed with the state.

Data about the Death with Dignity Participants in 2009

For the purposes of this report, a participant of the Death with Dignity Act in 2009 is defined as someone to whom medication was dispensed under the terms of the act in 2009. The Department of Health received the following documentation for 2009 Death with Dignity participants as of February 3, 2010:

Table 1. Documentation Received for 2009 Participants

Form	Number
Written Request to End Life Form	61
Attending Physician Compliance Form	61
Consulting Physician Compliance Form	61
Psychiatric/Psychological Consulting Form	3
Pharmacy Dispensing Record Form	63
After Death Reporting Form	44
Death Certificate	41

In 2009, lethal doses of medication were dispensed to 63 participants under the law. These prescriptions were written by 53 different physicians and dispensed by 29 different pharmacists.

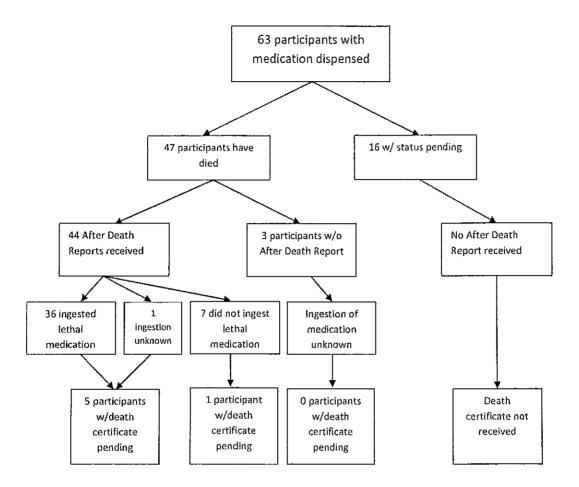
To date, the Department of Health has received fewer Written Requests and Attending and Consulting Physician Compliance Forms than Pharmacy Dispensing Records for the 2009 participants. When all the required paperwork is not received, department staff contacts health care providers to obtain the documentation.

Table I only includes the documentation received for individuals defined as participants (i.e., they received medication). The information posted on the Department of Health's Death with Dignity Web site about the number of forms received in 2009 includes all documentation received, including forms for people who did not go on to fill a prescription (and so are defined as non-participants). As a result, the numbers of documents listed in Table 1 do not match the numbers of documents received on the Department of Health Web site.

The Department of Health has received notification that 47 of the 63 participants have died (Figure 1). Death of a participant is established through receipt of the After Death Reporting form and/or the Death Certificate.

The status of the remaining 16 participants is unknown at this time. Some participants may still be alive since they may wait to use the medication or choose not to use it. It's also possible that some participants have taken the medication and died, but the Department of Health has not yet been notified because the After Death Reporting form is due 30 days after death and the Death Certificate is due 60 days after death.

Figure 1. Outcome of the 63 participants with medication dispensed under the terms of the Death with Dignity Act in 2009:



The data in Table 2 of this report describe the 47 participants who received medication under the terms of the Death with Dignity Act in 2009 and are known to have died.

Table 2. Characteristics of the participants of the Death with Dignity Act in 2009 who died:

	Number	%_
Sex		
Male	26	55
Female	21	45
Age (years) ¹		
18-34	0	0
35-44	0	0
45-54	6	13
55-64	6	13
65-74	18	38
75-84	10	21
85+	7	15
Range (min-max)	48-95	
Race and Ethnicity ²		
Non-Hispanic White	40	98
Hispanic and/or Non-White	1	2
Marital Status ²		
Married	19	46
Widowed	11	27
Divorced	9	22
Never married	2	5
Education ²		
Less than high school	1	2
High school graduate	15	37
Some college	9	22
Baccalaureate or higher	16	39
Residence ^{1,3}		
West of the Cascades	44	94
East of the Cascades	3	6
Underlying illness ¹		
Cancer	37	79
Neuro-degenerative disease (incl. ALS ⁴)	4	9
Respiratory disease (incl. COPD ⁵)	4	9
Other illnesses	2	3
Insurance Status ⁶		
Private only	12	28
Medicare or Medicaid only	19	43
Combination of private and Medicare/Medicaid	8	18
None	0	0
Unknown	5	11

¹ Data are collected from multiple documents. At time of publication, data are available for all 47 of the participants in 2009 who died.

² Data are collected from the Death Certificate. At time of publication, data are available for 41 of the 47 participants in 2009 who died (see Figure 1).

³ Counties west of the Cascades include: Clallam, Clark, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, and Whatcom. Counties east of the Cascades include: Adams, Asotin, Benton, Chelan, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Kittitas, Klickitat, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman, and Yakima.

⁴ Amyotrophic Lateral Sclerosis (ALS).

⁵ Chronic Obstructive Pulmonary Disease (COPD).

⁶ Data are collected from the After Death Reporting form. At the time of publication, data are available for 44 of the 47 participants in 2009 who died.

Table 3. End of life concerns of the participants of the Death with Dignity Act in 2009 who died:

	Number	%
End of Life Concerns ^{1, 2}		
Losing autonomy	44	100
Less able to engage in activities making life enjoyable	40	91
Loss of dignity	36	82
Losing control of bodily functions	18	41
Burden on family, friends/caregivers	10	23
Inadequate pain control or concern about it	11	25
Financial implications of treatment	1	2

¹ Data are collected from the After Death Reporting form. At the time of publication, data are available for 44 of the 47 participants in 2009 who died.

² Participants may have selected more than one end of life concern. Thus the totals are greater than 100 percent.

Table 4. Death with Dignity Act process for the participants in 2009 who died:

	Number	%
Family and Psychiatric/Psychological involvement	,	
Referred for psychiatric/psychological evaluation ¹	3	7
Patient informed family of decision ²	40	89
Medication ³		
Secobarbital	42	89
Pentobarbital	5	11
Other	0	0
Timing		
Duration of patient-physician relationship ⁴		
3 weeks – 24 weeks	23	
25 weeks – 51 weeks	4	
1 year or more	17	
Unknown	0	
Range (min – max)	3 weeks –	
	27 years	
Duration between first oral request and death ⁵	•	
3 weeks – 24 weeks	41	
25 weeks or more	3	
Unknown	0	
Range (min – max)	3 weeks –	
	43 weeks	

Data are collected from the Attending Physician's Compliance form. At the time of publication, data are available for 45 of the 47 participants in 2009 who died.

² Data are collected from the Written Request for Medication to End Life. At the time of publication, data are available for 45 of the 47 participants in 2009 who died.

³ Data are collected from the Pharmacy Dispensing Form. At the time of publication, data are available for all 47 of the participants in 2009 who died.

⁴ Data are collected from the After Death Reporting form. At the time of publication, data are available for 44 of the 47 participants in 2009 who died.

⁵ Data are collected from multiple documents. At the time of publication, data are available for 44 of the 47 participants in 2009 who died.

Table 5. Circumstances and complications related to ingestion of the medication prescribed under the Death with Dignity Act of the participants in 2009 who died:

	Number	%
Circumstances when medication ingested		
Health-care provider present		
Prescribing physician	3	8
Other provider, prescribing physician not present	17	47
No provider	12	34
Unknown	4	11
Location of patient		
Home (patient, family, friend)	34	94
Long term care, assisted living or foster care facility	0	0
Hospital	0	0
Other	0	0
Unknown	2	6
Hospice care		
Enrolled	26	72
Not enrolled	10	28
Timing		
Minutes between ingestion and unconsciousness		
1 min 10 min.	27	
11 min or more	4	
Unknown	5	
Range (min – max)	1 min. –	
,	20 min.	
Minutes between ingestion and death		
1 min - 90 min	25	
91 min or more	6	
Unknown	5	
Range (min – max)	9 min. –	
	28 hours	
Complications		
Regurgitation	1	3
Seizures	0	0
Awakened after taking prescribed medication	2	5
None	28	78
Unknown	5	14
Emergency Medical Services involvement	-	- •
Called for intervention after lethal medication ingested	0	0
Calls for other reason (including to pronounce death)	2	6
Not called after lethal medication ingested	31	86
Unknown	3	8

Data are collected from the After Death Reporting form. At the time of publication, data are available for 36 participants in 2009 who are known to have ingested the medication and died.

Confidentiality

The Death with Dignity Act requires that the Washington State Department of Health collect information and make an annual statistical report available to the public (RCW 70.245.150). The law also states that, except as otherwise required by law, the information collected is not a public record. That means it is not subject to public disclosure. Consistent with that statutory mandate, the Department of Health will not disclose any information that identifies patients, physicians, pharmacists, witnesses, or other participants in activities covered by the Death with Dignity Act. The information presented in this report is limited to items with sufficient numbers in a reporting field to ensure that confidentiality is protected.

REQUEST FOR MEDICATION TO END MY LIFE IN A HUMANE AND DIGNIFIED MANNER

I, Middle	Last	an adult of sound mind.		
I am suffering from, which my attending physician has determined is an incurable, irreversible terminal disease that will result in death within six months and which has been medically confirmed by a consulting physician.				
I have been fully informed of my diagnosis, prognosis, the nature of medication to be prescribed and potential associated risks, the expected result, and feasible alternatives, including comfort care, hospice care, and pain control.				
	I request that my attending physician prescribe medication that I may self-administer to end my life in a humane and dignified manner and dispense or to contact a pharmacist to dispense the prescription.			
Initial One I have informed my family of my decision and taken their opinions into consideration. I have decided not to inform my family of my decision. I have no family to inform of my decision.				
I understand that I have the right to rescind this re	quest at any time.			
I understand the full import of this request and I expect to die when I take the medication to be prescribed. I further understand that although most deaths occur within three hours, my death may take longer and my physician has counseled me about this possibility.				
I make this request voluntarily and without reservation; and I accept full moral responsibility for my actions. I further declare that I am of sound mind and not acting under duress, fraud, or undue influence.				
Signature:	County of Residence:	Date:		
DECLARATION OF WITNESSES By initialing and signing below in the presence of the person named above signs, we declare that the person making and signing the above request: Witness 1 Witness 2				
Printed Name:	Signature:	Date:		
Witness 1				
Printed Name:	Signature:	Date:		
Witness 2				

NOTE: Only one of two witnesses may be a relative by blood, marriage, or adoption of the person signing this request, or be entitled to any portion of the person's estate upon death. Only one of the two witnesses may own, operate, or be employed at a health care facility where the person is a patient or resident. The patient's attending physician at the time of the request is not eligible to be a witness. If the patient is an inpatient at a long-term health care facility, one of the witnesses shall be an individual designated by the facility.



ATTENDING PHYSICIAN'S AFTER DEATH REPORTING FORM

MAIL FORM TO: State Registrar, Center for Health Statistics, P.O. Box 47856, Olympia, WA 98504-7856

Dear Physician:

The Washington Death with Dignity Act requires physicians who write a prescription for a lethal dose of medication under the Act to report to the Department of Health information that documents compliance with the law. The attending physician shall complete this form within thirty calendar days of a patient's ingestion of a lethal dose of medication obtained pursuant to the act or death from any other cause, whichever comes first. If you do not know the answers to any of the following questions, please contact the family or patient's representative.

All individual information will be kept strictly confidential. Aggregate information will be provided on an annual basis. If you have questions about these instructions, please call 360-236-4324.

Physic	cian's Name:
Date: .	
Patien	t Name:
Date o	of Patient's Death://
County	y of Death:
1.	What was the patient's underlying illness?
2.	On what date did you begin caring for this patient? //(Mo/Da/Yr)
3.	On what date was the patient first told about their underlying medical condition? //(Mo/Da/Yr)
4.	On what date was the patient told they have a terminal disease – meaning an incurable and irreversible disease that will within reasonable medical judgment produce death within six months?
	/(Mo/Da/Yr)

5.	What type of health-care coverage did the patient have for their underlying illness? (Check all that apply.) 1 Medicare 2 Medicaid 3 Military/CHAMPUS 4 V.A. 5 Indian Health Service 6 Private insurance 7 No insurance 8 Had insurance, don't know type 9 Unknown
6.	When the patient initially requested a prescription for the lethal dose of medication, was the patier receiving hospice care? 1 Yes 2 No, refused care 3 No, other (specify) 9 Unknown
7.	Seven possible concerns that may have contributed to the patient's decision to request a prescription for the lethal dose of medication are shown below. Please check "Yes," "No," or "Don't know," depending on whether or not you believe that concern contributed to the request.
	A concern about:
	the financial cost of treating or prolonging his or her terminal condition. Yes No Don't Know
	the physical or emotional burden on family, friends, or caregivers. ☐ Yes ☐ No ☐ Don't Know
	his or her terminal condition representing a steady loss of autonomy. Yes No Don't Know
	the decreasing ability to participate in activities that made life enjoyable. Yes No Don't Know
	the loss of control of bodily functions, such as incontinence and vomiting. Yes Don't Know
	inadequate pain control at the end of life. ☐ Yes ☐ No ☐ Don't Know
	a loss of dignity. ☐ Yes ☐ No ☐ Don't Know
В.	On what date was the prescription for a lethal dose of medication written or phoned in?
	/(Mo/Da/Yr)
Э.	What medication was prescribed and what was the dosage?
10.	On what date was the lethal dose of medication dispensed to the patient? //(Mo/Da/Yr)

11. Did the patient ingest the lethal dose of medication?
1 Yes 2 No (If NO, then please skip to question 22)
12. Were you with the patient when they took the lethal dose of medication? 1 Yes 2 No, did not offer to be present at the time of ingestion 3 No, offered to be present, but the patient declined 8 No, other (specify):
If no: Was another physician or trained health care provider or volunteer present when the patient ingested medication? 1 Yes, another physician 2 Yes, a trained health-care provider/volunteer (specify):
☐ 3 No ☐ 9 Unknown
13. Were you with the patient at the time of death? ☐ 1 Yes ☐ 2 No
If no: Was another physician or trained health care provider or volunteer present at the patient's time of death? 1 Yes, another physician 2 Yes, a trained health-care provider/volunteer 3 No 9 Unknown
If no: How were you informed of the patient's death? 1 Family member called M.D. 2 Friend of patient called M.D. 3 Another physician 4 Hospice R.N. 5 Hospital R.N. 6 Nursing home/Assisted-living staff 7 Funeral home 8 Medical Examiner 9 Other (specify):
14. Did the patient take the lethal dose of medication according to the prescription directions?☐ 1 Yes☐ 2 No
If no: Please list the medications the patient took (other than those reported in item 10), the dosages, and the reason for not following the prescription directions.
☐ 9 Unknown

	rinere any complications after the ingestion of the lethal dose of medication, for example sing, seizures, or regaining consciousness? Yes
_	Please Describe:
_	No Unknown
dose	the Emergency Medical System activated for any reason after the ingestion of the letha of medication? Yes
	Please describe:
	No Unknown
17. What	was the time between ingestion of the lethal dose of medication and unconsciousness
Minute	es: or Hours: 🔲 Unknown
18. What	was the time between ingestion of the lethal dose of medication and death?
Minute	es: or Hours: □ Unknown
If the	patient lived longer than six hours: Do you have any observations on why the patient lived for more than six hours after ingesting the medication?
(ECO	diately prior to ingestion of the lethal dose of medication, what was the patient's mobili G scale) Fully active, no restrictions on pre-disease performance. Restricted in strenuous activity, but ambulatory and able to carry out work. Ambulatory and capable of all self-care, but no work activities; up and about more that
□ 3	50% of waking hours. Capable of only limited self-care; in bed or chair more than 50% of waking hours. Completely disabled, no self-care, totally confined to bed or chair.

20. Where did the patient ingest the 1 Private home 2 Assisted-living residence (3 Nursing home 4 Acute care hospital in-pati 5 In-patient hospice residen 6 Other (specify) 9 Unknown	(including foster care) ent t		
 21. At the time of ingestion of the le 1 Yes 2 No, refused care 3 No, other (specify) 9 Unknown		•	•
22. What is your medical specialty? 1 Family Practice 2 Internal Medicine 3 Oncology 4 Other (specify)			
23. How many years have you been or fellowship?	in practice, not includ	ing any training period	s, such as residency
Years:			
24. And lastly, do you have any com insights that you would like to sh	nare with us?	p questionnaire, or an	
Original Signature of Physician:			
FOR OFFICIAL USE ONLY CASE ID NUMBER: PHYSICIAN ID	☐ DWDA	☐ ILLNESS	OTHER
NUMBER:			



ATTENDING PHYSICIAN'S COMPLIANCE FORM

MAIL FORM TO: State Registrar, Center for Health Statistics, P.O. Box 47856, Olympia, WA 98504-7856

1	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
	PATIENT'S NAME (LAST, FIRST, M.I.)	DATE OF BIRTH:
	MEDICAL DIAGNOSIS	
В	PHYSICIAN INFORMATION	
_	NAME (LAST, FIRST, M.I.)	TELEPHONE NUMBER
	MAILING ADDRESS	
	CITY, STATE AND ZIP CODE	
С	ACTION TAKEN TO COMPLY WITH LAW 1. FIRST ORAL REQUEST	
	First oral request for medication to end life.	DATE
	Comments:	1
	Indicate compliance by checking the boxes. (Both the attending and consulting physicians.) 1. Determination that the patient has a terminal disease. 2. Determination the patient has six months or less to live. 3. Determination that patient is competent.* 4. Determination that patient is a Washington state resident.** 5. Determination that patient has made his/her decision after being fully informed a). His or her medical diagnosis; and b) His or her prognosis; and c) The potential risks associated with taking the medication to be prescribed d). The potential result of taking the medication to be prescribed; and e) The feasible alternatives, including, but not limited to, comfort care, hospinalizate compliance by checking the boxes. 1. Patient informed of his or her right to rescind the request at any time. 2. Patient recommended to inform next of kin. 3. Patient counseled about the importance of having another person present when the patient takes the medication(s). 4. Patient counseled about the importance of not taking the medication in a public place. 2. SECOND ORAL REQUEST (Must be made 15 days or more after the first oral relationate compliance by checking the boxes. 1. Second oral request for medication to end life. 2. Patient informed of the right to rescind the request at any time.	ed of: I; and ice care and pain control. DATE:

ATTENDING PHYSICIAN'S COMPLIANCE FORM (continued)

	PATIENTII	VFORMATION				
	PATIENT'S NAME (LAST, FIRST, M.I.)		DATE OF BIRTH			
		NAME OF THE PERSON OF THE PERSON OF THE PERSON OF	Tall the Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second Second			
С		Y WITH THE LAW - continued				
	PATIENT'S WRITTEN REQUEST Written request for medication to end life received. Please attach request. (No less than 48 DATE					
	hours shall elapse between the written request and writing		D/ (TE			
•	Comments:					
D		N (Attach consultant's form.)	· · · · · · · · · · · · · · · · · · ·			
	Medical consultation and second opinion requested from: MEDICAL CONSULTANT'S NAME	TELEPHONE NUMBER	DATE			
	MEDICAL CONSOCIATIO NAME	/) _	DATE.			
E	PSYCHIATRIC/PSYCH	OLOGICAL EVALUATION	gen a trade grander was the second			
	Check one of the following (required):					
	I have determined that the patient is not suffering from a		depression, causing			
	impaired judgment, in accordance with chapter 70.245 RCW. I have referred the patient to the provider listed below for evaluation and counseling for a possible psychiatric or					
	psychological disorder, or depression causing impaired ju	evaluation and counseling for a possible udoment, and attached the consultant'	e psychiatric or 's form.			
- 1	PSYCHIATRIC CONSULTANT'S NAME	TELEPHONE NUMBER	DATE			
F	MEDICATION PRESCRIBED AND IN					
	(To be prescribed no sooner than 48 hours LETHAL MEDICATION PRESCRIBED AND DOSE	after patient's written request has be	DATE PRESCRIBED			
	EETHAL MILDICATION FILESCINDED AND DOSE		DATETREGORIDED			
	Please check one of the following:		<u> </u>			
	Dispensed medication directly. Date//					
	Contacted pharmacist and delivered prescription per	sonally or by mail to the pharmacist				
	Pharmacy Name	City Phone #	() -			
	Immediately prior to writing the prescription, the patient v					
	(a) his or her medical diagnosis;	vas fully informed of, (check boxes)				
	(a) his of her medical diagnosis,					
		radication to be proporihed:				
	(d) the probable result of taking the medication to	·	ad a sta santual			
	(e) the feasible alternatives, including, but not limi					
	To the best of my knowledge, all of the requirements und	der the Washington Death with Digni				
	PHYSICIAN'S ORIGINAL SIGNATURE		DATE			
	*					

^{* &}quot;Competent" means that, in the opinion of a court or in the opinion of the patient's attending physician or consulting physician, psychiatrist, or psychologist, a patient has the ability to make and communicate an informed decision to health care providers, including communication through persons familiar with the patient's manner of communicating if those persons are available.

^{**} Factors demonstrating residency include, but are not limited to: 1) Possession of a Washington state driver's license; 2) Registration to vote in Washington state; 3) Evidence that a person owns or leases property in Washington state.



CONSULTING PHYSICIAN'S COMPLIANCE FORM

Deliver this form to the attending physician who will mail it to:
State Registrar, Center for Health Statistics,
P.O. Box 47856, Olympia, WA 98504-7856

Α	PATIEN	ITINFORMATION			
	PATIENT'S NAME (LAST, FIRST, M.I.)		DATE OF BIRTH		
В	REFERRING/P	RESCRIBING PHYSICIAN			
	REFERRING/PRESCRIBING PHYSICIAN'S NAME (LAST	, FIRST, M.I.)	TELEPHONE NUMBER		
			() –		
С	CONSU	LTANT'S REPORT			
	1. MEDICAL DIAGNOSIS		DATE OF EXAMINATION(S)		
	2. Check boxes for compliance. (Both the attending and c	onsulting physicians must make these	determinations.)		
	1. Determination that the patient has a termination.	al disease.			
	2. Determination the patient has 6 months or less to live.				
	3. Determination that patient is competent.*				
-	4. Determination that patient is acting voluntarily.				
	5. Determination that patient has made his/her decision after being fully informed of:				
	a. His or her medical diagnosis; and				
	b. His or her prognosis; and				
	c. The potential risks associated with taking the medication to be prescribed; and				
	d. The potential result of taking the medication to be prescribed; and				
1	e. The feasible alternatives, including, but n	ot limited to, comfort care, hospice	care, and pain control.		
-	Comments:				
L					
D	PATIENT'	S MENTAL STATUS			
	Check one of the following (required):				
	I have determined that the patient is not sufferi causing impaired judgment, in conformance wi		ical disorder, or depression		
	I have referred the patient to the provider listed		ing for a possible psychiatric		
	or psychological disorder, or depression causir				
	PSYCHIATRIC CONSULTANT'S NAME	TELEPHONE NUMBER () —	DATE		
E		NT'S INFORMATION	Tower		
	PHYSICIAN'S ORIGINAL SIGNATURE		DATE		
	NAME (PLEASE PRINT)				
	MAILING ADDRESS				
	CITY, STATE AND ZIP CODE		TELEPHONE NUMBER		
	OITT, OTATE AND ZIF GODE		() —		
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^{* &}quot;Competent" means that, in the opinion of a court or in the opinion of the patient's attending physician or consulting physician, psychiatrist, or psychologist, a patient has the ability to make and communicate an informed decision to health care providers, including communication through persons familiar with the patient's manner of communicating if those persons are available.



PHARMACY DISPENSING RECORD

MAIL FORM TO: State Registrar, Center for Health Statistics, P.O. Box 47856, Olympia, WA 98504-7856

Α	PATIENT'S NAME (LAST, FIRST, M.I.)			OF BIRTH:
	MAILING ADDRESS:			
	CITY, STATE AND ZIP CODE:			
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	CITY, STATE AND ZIP CODE:			
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	NAME (LAST, FIRST, M.I.) AND TITLE:	EALTH SAILE LICE	TELEPHONI	
	MAILING ADDRESS:			
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	MEDICATIONS #1	QUANTITY	DATE PRESCRIBED	
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	#2			
	#3			
	#4			
= -	DISPENSING HEALTH CARE PROVIDER'S OF	SIGNATURE		
-				DATE



PSYCHIATRIC/PSYCHOLOGICAL CONSULTANT'S COMPLIANCE FORM

Deliver this form to the attending physician who will mail it to:
State Registrar, Center for Health Statistics,
P.O. Box 47856, Olympia, WA 98504-7856

A	PATIENT INFORMATION	理解的主要特定企业的基础企业表现的主义。
	PATIENT'S NAME (LAST, FIRST, M.I.):	DATE OF BIRTH:
		-Sample
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	REFERRING PHYSICIAN'S NAME (LAST, FIRST, M.I.):	TELEPHONE NUMBER:
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C	PSYCHIATRIC / PSYCHOLOGICAL EVALU	
	1. MEDICAL DIAGNOSIS	DATE(S) OF EXAMINATION(S):
	2. PSYCHIATRIC / PSYCHOLOGICAL EVALUATION	
		Levinor
		Q
		
D	PSYCHIATRIC/PSYCHOLOGICAL CONSULTANT'S	INFORMATION
ט		
	I have determined through evaluation that the above-named patient is not suffering disorder or depression causing impaired judgment, in conformance with chapter 7	
	CONSULTANT'S ORIGINAL SIGNATURE AND TITLE (e.g., M.D., Ph.D., et	
		o. _/ .
	CONSULTANT'S NAME (PRINTED):	
	CONSULTANT'S NAME (PRINTED):	DATE:
!	MAILING ADDRESS:	
	OITY CTATE AND 3ID CODE.	TELEBRIONE MILLIONS
	CITY, STATE AND ZIP CODE:	TELEPHONE NUMBER:
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IV. ACTION ITEMS
A.7. Office of the Secretary of State

May 10, 2010

Washington State Records Committee PO Box 40238
Olympia, WA

Re:

Legacy Project - Office 270

Elections - Office 400

Dear Committee Members,

Legacy Project – This schedule, 99-01-59007 is being changed to Archival on the advice of Archivist Terry Badger.

Elections - We are creating this new schedule for the Archive Transaction DB Prod section of the Voter Registration Database. This Archive Transaction DB Prod holds the correspondence from the counties to make the changes needed in the database. Once the changes are made these messages are stored in this database. This new schedule will allow us to purge the correspondence after 12 months.

Let me know if you have any questions.

Sincerely,

Brenda Galarza Records/Public Disclosure Officer PO Box 40224 Olympia, WA 98504-0224 360-236-5040 Brenda.galarza@sos.wa.gov

Secretary of State

Washington State Archives
Records Management Section
PO Box 40238
Olympia, WA 98504-0238
(350) 586-4901

REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REFERENCE: RCW 40.14

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Administrative Services PO Box 40224 Olympia, WA 98504-0224 Tel: 360.586.7522 www.secstate.wa.gov

May 11, 2010

Washington State Records Committee PO Box 40238 Olympia, WA

Re: Elections - Office 400

Dear Committee Members,

BALLOT STATUS TRANSACTION MESSAGES AND DATA

This new schedule is for the ballot status transaction messages between the county voter registration systems and the Washington Information System (WEI), and for data displayed in the ballot status tables. This is voter ballot status messages sent to the WEI transaction database, and the ballot status information populated in tables in the WEI transaction database. Once the ballot status data is displayed for an election, it is no longer needed. It is merely a duplicate of data stored in the county voter registration systems.

PRECINCT/DISTRICT TRANSACTION MESSAGES

This new schedule is for the precinct/district transaction messages between the county voter registration systems and the Washington Information System (WEI). This is precinct/district messages for district syncs, which updates tables in the Production WEI. Once the tables are updated, these messages are stored in tables.

WASHINGTON ELECTION INFORMATION LOGGING DATABASE ERROR LOGS

This new schedule is for the error logs in the Washington Election Information (WEI) Logging Database. These error logs are saved in a table, by date and time of error.

Creating these new schedules will allow us to purge these error logs after 12 months.

Let me know if you have any questions.

Sincerely,

Brenda Galarza

Records/Public Disclosure Officer

PO Box 40224

Olympia, WA 98504-0224

360-236-5040

brenda.galarza@sos.wa.gov

RECORDS COORDINATOR PHONE NO. OF 1 OFFICE NO. 400 DATE OF SUBMITTAL 5-10-2010 360-902-4188 PAGE 11 TOTAL.

(Years) 10-06-62222 RECORDS OFFICER PHONE NO. REQUEST For RECORDS RETENTION SCHEDULE 360-236-5040 AND DISPOSITION AUTHORITY NUMBER 1 Year Elections
RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 (Months in Records Center) CORDS OFFICER SIGNATURE (Requised) I hereby certify that I have completed an appraisal of the record series and assamined this schedule for accuracy. 0 Patty Murphy 7 OFFICE NAME Transaction Date OFM Washington State Archives
Records Management Section
PO Box 40238
Olympia, WA 98504-0238
(360) 586-4901 Description: Voter registration correspondence/messages sent between County voter registration systems and the statewide Voter Registration Database (VRDB). Title: VOTER REGISTRATION TRANSACTION MESSAGES -☐ TRANSFER 520 Union Avenue SE, Olympia, WA 98504 Office of Secretary of State MINEW | REVISED | DISCONTINUED TIEM STATUS TITLE DESCRIPTION Secretary of State ADDRESS (MS or Street, City and Zip Code) Revision No. / Statement RECORDS OFFICER NAME Brenda Galarza AGENCY OFM NO. 085

	DATE OF ACTION:	WENT FORTHESTATE ARCHIVIST	FOR RECORDS MANAGEMENT STAFF FEGULATION
STATE RECORDS COMMITTEE// RECORDS MANAGEMENT STAFF ACTION	☐ Approved ☐ Returned to agency for further work	FOR THE OFFICE OF FINANCIAL WANAGEMENT	UTHORIZED RECORDS MANAGEMENT STAFF. SIGNATURE: For minor revisions to title / description, increase in Records Center retention / reduction office retention (no change to total), series discontinued and replaced by the State General Schedules, and office transfers:
	ACTION:	FOR THE STATE AUDITOR	AUTHORIZED RECORDS MANAGEI in office retention (no change to total).

Secretary of State

Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Washington State Archives

RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REQUEST F

REFERENCE: RCW 40.14

OF 11

PAGE 1

RECORDS COORDINATOR PHONE NO. SACHIVAL DESIGNATION REMARKS OFFICE NO. 400 DATE OF SUBMITTAL 5/11/2010 360-902-4188 DISPOSITION AUTHORITY NO (DAN) 10-06-62218 10-06-62219 10-06-62220 RECORDS OFFICER PHONE NO. 360-236-5040 TOTAL (Years) 1 Year 1 Year 1 Year RECORDS COORDINATOR CONTACT NAME ** INACTIVE (Months in S Records Center) RETENTION CORPS OFFICER SIGNATURE (Required) I hereby certify that I have completed an specifical of the 195ord series and examined this schedule for accuracy. 0 0 0 Patty Murphy Elections 7 5 4 OFFICE NAME Transaction Transaction Transaction Date Date Date RECORDS OFFICER SIGNATURE (Required) OFM OFM OFM Description: Precinct/district correspondence/messages sent between Title: BALLOT STATUS TRANSACTION MESSAGES AND DATA - Description: Ballot status data sent between County voter registration and the state for the Washington Election Information System (WEI) Title: WASHINGTON ELECTION INFORMATION (WEI) LOGGING County voter registration systems and the state for the Washington Election Information System (WEI).
Revision No. / Statement DATABASE ERROR LOGS Description: Error logs posted in Washington Election Information logging database
Revision No. / Statement Title: PRECINCT/DISTRICT TRANSACTION MESSAGES -NEW ☐ REVISED ☐ DISCONTINUED ☐ TRANSFER New □ REVISED □ DISCONTINUED □ TRANSFER TRANSFER 500 Union Avenue SE, Olympia, WA 98504 ☐ DISCONTINUED Secretary of State STATUS/TITLE/DESCRIPTION ADDRESS (MS or Street, City and Zip Code) M NEW ☐ REVISED Revision No. / Statement AGENC RECORDS OFFICER NAME Brenda Galarza AGENCY OFM NO. 085 N

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IV. ACTION ITEMS
A.8. Department of Labor & Industries



STATE OF WASHINGTON DEPARTMENT OF LABOR AND INDUSTRIES Rec'd

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May 04, 2010

Secretary of State WA, STATE ARCHIVES

TO:

State Records Committee (SRC) Members

Archival Review Committee Members (ARC)

Russell Wood, State Records Management Office (RMO)

Michele Mallery, RMO

FROM:

Lysa Homan Walker, Department of Labor & Industries (L&Y/Z

SUBJECT:

NEW RECORDS SERIES FOR THE JUNE SRC MEETING FROM THE

HEALTH SERVICES ANALYSIS (HSA) SECTION

Dear SRC, ARC Members, Russell and Michele:

Attached is a new records series for HSA in the Insurance Services Division, to be included on the June SRC agenda.

In 1985, RCW 51.36.080 was passed requiring L&I to provide a progress report on health care cost containment and introducing the HSA program with a mission to assure access to quality cost-effective health care and vocational services for injured workers.

Since their beginning, HSA has expanded its prospective payment systems and has implemented many innovative payment programs to not only assure injured workers access to care, but also to accomplish the agency's mission of being a prudent purchaser of health care.

One of the options HSA provides to injured workers is the access to a second opinion by Chiropractors who voluntarily participate in the program. The records created for this program fall under the attached new records series we are requesting for review by the committee.

We appreciate your time and consideration. As always, if you have any questions prior to the meeting, please do not hesitate to contact me at (360) 902-5777 or wdvs235@Lni.wa.gov.

Enclosure

RECORDS COORDINATOR PHONE NO 05-04-2010 DATE OF SUBMITTAL OF 902-6817 PAGE 1 540 10-06-62216 RECORDS OFFICER PHONE NO. 902-5777 REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER 3 years Health Service Analysis (HSA) RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 24 mo Joanne McDaniel 12 mo OFFICE NAME Agreement Terminated OFM appraisal of the apply to perform second opinions on injured workers referred by their doctors. Records may include but are not limited to: program application, copy of chiropractic license, continuing education credits, performance agreement, attestation letters and correspondence. Description: Provides documentation of Chiropractors who voluntarily Washington State Archives Records Management Section PO Box 40238 Department of Labor and Industries Olympia, WA 98504-0238 Title: CHIROPRACTIC CONSULTATION FILES (360) 586-4901 NEW ☐ REVISED ☐ TRANSFER Secretary of State ADDRESS (MS or Street, City and Zip Code STATUS/TITLE/ DESCRIPTION Revision No. / Statement: Lysa Homan Walker AGENC RECORDS OFFICER NAME Media: Paper. AGENCY OFM NO. MS: 44322 235

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STATE OF WASHINGTON DEPARTMENT OF LABOR AND INDUSTRIES

May 12, 2010

TO:

State Records Committee (SRC) Members Archival Review Committee Members (ARC)

Russell Wood, State Records Management Office (RMO)

Michele Mallery, RMO

FROM:

Lysa Homan Walker, Department of Labor & Industries (L

SUBJECT:

NEW RECORDS SERIES FOR THE JUNE SRC MEETING FROM THE POLICY

AND QUALITY COORDINATION PROGRAM

Dear SRC, ARC Members, Russell and Michele:

Attached is a new records series for the Policy and Quality Coordination (PQC) program in the Insurance Services Division, to be included on the June SRC agenda.

PQC program represents the largest group of senior adjudicators in the agency. These adjudicators provide a variety of services that support claims management. PQC includes:

- Claims Training
- Coach/Mentoring
- · Pension Benefits/Social Security Offset
- Quality Assurance
- Rules and Policy
- Special Application System Support

The attached records series are specific to the Claims Training, Coach Mentoring, and Rules and Policy units.

Item 1 encompasses the all the documentation regarding the development and the use of the claim's training material used to train claims staff. It also includes historical records regarding the creation of policies and procedures and special projects specific to the program's mission.

Item's 2 and 3 include the Claims Training and Coach/Mentoring program records. Item 2 is mostly electronic. All the working files are entered into the electronic central filing system, which is considered the original record. Item 3 are the mostly paper copies of those working files.

We appreciate your time and consideration. As always, if you have any questions prior to the meeting, please do not hesitate to contact me at (360) 902-5777 or wdys235@Lni.wa.gov.

Enclosure

Mallery, Michele

From:

Homan Walker, Lysa (LNI) [wlys235@LNI.WA.GOV]

Bent:

Thursday, May 13, 2010 7:14 AM

To:

Mallery, Michele

Subject:

RE: Another submission for the June agenda

Follow Up Flag: Flag Status:

Follow up Flagged

Hi, Michele,

This is not just some kind of 'basic' one or two day training. It is an in-depth 22 mth training program that results in an individual acquiring journeyman status as workers compensation claims managers. Furthermore, the program is required to provide documentation to the Washington State Apprenticeship Training Council. I think it is quite clear that this goes beyond something that can be documented in section GS 22 of the General Schedule.

If you have any questions, please let me know.

Lysa~

From: Mallery, Michele [mailto:michele.mallery@sos.wa.gov]

Sent: Wednesday, May 12, 2010 3:26 PM

To: Homan Walker, Lysa (LNI)

Subject: RE: Another submission for the June agenda

Lysa,

I am writing to you on behalf of the Washington State Archivist and would like to thank you for submitting the records retention schedules for the Department of Labor & Industries Office 560 – Policy & Quality Coordination dated May 12, 2010 which was received and reviewed by the Records Management Office on May 12, 2010.

I have reviewed the submitted schedule for Office 560 – Policy & Quality Coordination and request the following corrections:

Please clarify as to why these would not fall under GS 22003, 22004 or other GS 22 series.

Please make the requested corrections and re-submit an electronic copy for review.

In the meantime, if you have any questions on the status of this schedule, please don't hesitate to contact me by email or telephone (360) 586-4901.

Best Regards, Michele Mallery

State Government Records Management Specialist

Washington State Archives Office of the Secretary of State 1129 Washington Street SE; MS: 40238 Olympia, WA 98504

[Please note new email address] Michele.Mallery@sos.wa.gov

Phone: 360-586-4901 Fax: 360-586-0368

To receive updates on records management advice, records retention schedules and training, click on the following link:

http://www.sos.wa.gov/archives/RecordsManagement/records state.aspx

Learn more about the Washington State Archives

Review the State Records Committe Minutes
Review the Local Records Committee Minutes

From: Homan Walker, Lysa (LNI) [mailto:wlys235@LNI.WA.GOV]

Sent: Wednesday, May 12, 2010 1:49 PM

To: Mallery, Michele

Subject: Another submission for the June agenda

Hi, Michele,

I imagine I'm going to rival the UW in June...see who can be last on the agenda!

Attached are three new records series for the policy and quality coordination program.

Please let me know if you have any questions.

Thanks!

<<PQC Active Records_0510.docx>> <<PQC SRC Memo 0510.pdf>>

bysa

legsa Homan Weiker

Agency Records Officer
Forms and Records Management Supervisor
Department of Labor & Industries

MS: 44842 360-902-5777

FAX: 360-902-5805 wlys235@Lni.wa.gov

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In the spring I have counted one hundred and thirty-six different kinds of weather inside of four

and twenty four hours. - Mark Twain

OF \$2 RECORDS COORDINATOR PHONE NO. OFFICE NO. 05/12/2010 560 DATE OF SUBMITTAL 902-9144 PAGE 10-06-62223 10-06-62224 RECORDS OFFICER PHONE NO. 902-5752 REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER 25 years 4 years Policy and Quality Coordination RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 276 mo 24 mo RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an appraisal of the record series and examined this schedule for accuracy. Sue Callaghan 24 mo 24 mo OFFICE NAME ÓPKÓFIM CUITOFF Calendar Year Journeyman status OPR OFM Description: Records include all participant documentation throughout the 22 month Apprentice program and any other training program established for claims administration staff. Documentation may such as the creation of policies and procedures, and projects related to the mission of the Policy and Quality Coordination program. Media: Paper, electronic and email. Title: POLICY AND QUALITY COORDINATION PROGRAM AND TRAINING Description: Provides documentation of the development and use of Includes lesson plans and designs. Also includes historical records reports, coach and trainer daily & monthly logs and submittal forms. Media: Some paper, mostly electronic. instructional and on-the-job material for the training of claims staff. Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 include but is not limited to: work checking documents, feedback Title: CLAIMS ADMINISTRATION TRAINING AND APPRENTICESHIP PROGRAM RECORDS Nashington State Archives Department of Labor and Industries NEW | REVISED | TRANSFER NEW | REVISED | TRANSFER TIEM STATUS TITLE DESCRIPTION Secretary of State ADDRESS (MS or Street, City and Zip Code Revision No. / Statement: Revision No. / Statement RECORDS OFFICER NAME Lysa Homan AGENCY OFM NO. MS: 44310 235

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STATE OF WASHINGTON DEPARTMENT OF LABOR AND INDUSTRIES

May 05, 2010

TO:

State Records Committee (SRC) Members

Archival Review Committee Members (ARC)

Russell Wood, State Records Management Office (RMO)

Michele Mallery, RMO

FROM:

Lysa Homan Walker, Department of Labor & Industries (L&L)

SUBJECT:

NEW RECORDS SERIES FOR THE JUNE SRC MEETING FROM THE

PENSION BENEFITS SECTION

Dear SRC, ARC Members, Russell and Michele:

Attached is a new records series for the Pension Benefits section in the Claims Administration section, to be included on the June SRC agenda.

Pension benefits are for those who have been injured on the job and can no longer work due to their injuries, or for the families of those who have died from a work-related injury or illness.

If a pension is awarded to the injured worker, or their family, they will receive a monthly pension payment for their lifetime.

If an individual is, or begins, receiving Social Security benefits, they must notify L&I of that change as their future benefits may be reduced depending upon the effective date of their pension and their highest year's wages. Social Security benefits do not affect a surviving family's pension rates.

This new records series is for all changes made to an individual or family receiving pension benefits. The State Auditor's Office has directed the Pension benefits program to randomly compile statistics for 20% of individuals or families receiving benefits that changes have been made to their accounts. The statistics compiled will be used during audit's conducted by the SAO.

We appreciate your time and consideration. As always, if you have any questions prior to the meeting, please do not hesitate to contact me at (360) 902-5777 or wlys235@Lni.wa.gov.

Enclosure

RECORDS COORDINATOR PHONE NO. PESIGNATIONREMARKS 05/05/10 OF DATE OF SUBMITTAL 902-5155 PAGE | 1 564 RECORDS OFFICER PHONE NO. Insurance Services - Policy and Coordination 902-5777 REQUEST FULL RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER TOTAL (Years) RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 ACTIVE INDECTIVE (Months in In Office) | Records Center) | Kave completed an Carrie Boyd OFFICE NAME Pension RECORDS OFFICER SIGNATURE (Required) appraisal of the record series and exam Description: Provides documentation of changes made to pension benefit accounts, including Social Security Administration (SSA) benefit coordination. A percentage of all changes are reviewed and Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901 Title: PENSION BENEFIT ACCOUNT CHANGE RECORDS Washington State Archives Department of Labor and Industries NEW ☐ REVISED ☐ TRANSFER Secretary of State ADDRESS (MS or Street, City and Zip Code) STATUS/TITLE/DESCRIPTION Lysa Homan Walker RECORDS OFFICER NAME AGENCY OFM NO. MS: 44282 235 **1**2

10-06-62217

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Review Complete

OPR

Auditor's Office. Working files include but are not limited to: Pension Benefit change reports, special on time payments of pension benefits, children who reach the ages of 18 and/or 23 years, SSA benefit coordination reports, tracking spreadsheet and final monthly statistic reports. Media: Paper and Electronic.

Revision No. / Statement:

compiled into a report used for auditing purposes by the State

ACTION: Approved Beturned to agency for further work DATE OF ACTION: Approved Beturned to agency for further work DATE OF ACTION: POR THE ATTORNEY GENERAL FOR THE OFFICE OF FINANCIAL MANAGEMENT FOR THE STATE ARCHIVIST AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: Forming evisions to title / description; increase in Records Center retention/reduction increase in Records Center retention (no change to total), series discontinued and replaced by the State General Schedules, and office transfers			· 有一般 · 可		H. (1)	
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STATE OF WASHINGTON DEPARTMENT OF LABOR AND INDUSTRIES

April 22, 2010

TO:

State Records Committee (SRC) Members

Archival Review Committee Members (ARC)

Russell Wood, State Records Management Office (RMO)

Michele Mallery, RMO

FROM:

Lysa Homan Walker, Department of Labor & Industries (L&L)

SUBJECT:

NEW RECORDS SERIES FOR THE JUNE SRC MEETING FROM THE

FINANCIAL SERVICES SECTION

Dear SRC, ARC Members, Russell and Michele:

Attached is a new records series for the Financial Services section in the Administrative Services Division, to be included on the June SRC agenda.

One of the responsibilities of the Financial Services section is to notify individuals of unclaimed property (funds) owed to them. A due diligence letter is sent to them with their most recent known address. The letter contains an affidavit that they mail back to L&I to have their unclaimed property returned to them.

In some cases, the last known address is incorrect and is returned by the United States Postal Service undeliverable. RCW 63.29.310(1) titled Retention of Records states: "Every holder required to file a report under RCW 63.29.170, as to any property for which it has obtained the last known address of the owner, shall maintain a record of the name and last known address of the owner for six years after the property becomes reportable."

We currently maintain a spreadsheet with information on when and where we sent the due diligence letter. However, we also keep the returned mail as proof that we sent the letter and was returned undeliverable. If Financial Services has not heard from the individual after one year, the unclaimed property is reported to the Department of Revenue (DOR).

After conferring with the Unclaimed Property Unit at DOR, it was determined that we should create a unique retention schedule for these records as nothing in the State General Records Retention Schedule fits.

We appreciate your time and consideration. As always, if you have any questions prior to the meeting, please do not hesitate to contact me at (360) 902-5777 or wlys235@Lni.wa.gov.

Enclosure

RECORDS COORDINATOR PHONE NO. 04-22-2010 DATE OF SUBMITTAL 902-6621 PAGE 1 OFFICE NO. 934 10-06-62214 RECORDS OFFICER PHONE NO. 902-5777 Administrative Services - Financial Services REQUEST FOR RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER 6 years INACTIVE TOTAL
(Months in the Nears)
(Records Center) RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 66 mo A JURE (Required) I hereby certify that Hays completed 30 series and examined this schedyle-Toy acceluacy. Pam McCormick 6 mo OFFICE NAME Date Letter Returned by USPS OPR appraisal of the record Description: Provides a record of the due diligence process for notifying individuals who have unclaimed property (funds) per RCW 63.29.310 (1). Documentation includes due diligence letters returned by the United State Póstal Service (USPS) as undeliverable and tracking spreadsheet. Media: Paper and electronic. Washington State Archives
Records Management Section
PO Box 40238
Olympia, WA 98504-0238
(360) 586-4901 Department of Labor and Industries Title: UNCLAIMED PROPERTY RECORDS N NEW ☐ REVISED ☐ TRANSFER Secretary of State ADDRESS (MS or Street, City and Zip Code) STATUS/TITLE/DESCRIPTION Revision No. / Statement: Lysa Homan Walker RECORDS OFFICER NAME AGENCY OFM NO. MS: 44838 235 TEM

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STATE OF WASHINGTON DEPARTMENT OF LABOR AND INDUSTRIES

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WA. STATE ARCHIVES

April 19, 2010

TO:

State Records Committee (SRC) Members

Archival Review Committee Members (ARC)

Russell Wood, State Records Management Office (RMO)

Michele Mallery, RMO

FROM:

Lysa Homan Walker, Department of Labor & Industries (L&)

SUBJECT:

NEW RECORDS SERIES FOR THE JUNE SRC MEETING FROM THE

SERVICES THIRD PARTY UNIT

Dear SRC, ARC Members, Russell and Michele:

Attached is a new records series for the Third Party unit in Legal Services to be included on the June SRC agenda.

It is the responsibility of the Third Party unit to ensure the recovery of all Workers' Compensation Benefits paid due to the fault of a third party. If a worker's injury is caused by a third party, he/she may seek recovery of damages from the at-fault third party while also receiving Workers' Compensation Benefits, provided any benefits received by the worker are to be repaid from the third party recovery. If the worker chooses not to seek damages from the third party, L&I may stand in his/her shoes to recover the worker's damages.

The new records series is simply for their Third Party Tracking System. It is used to track all case files that the Third Party staff are working on. The documentation also contains fiscal records. The paper working files fall under DAN 97-03-57532 and the final mediation disposition is maintained in the claim file under DAN 07-09-61619.

We appreciate your time and consideration. As always, if you have any questions prior to the meeting, please do not hesitate to contact me at (360) 902-5777 or www.uys235@Lni.wa.gov.

Enclosure

Washington State Archives Records Management Section PO Box 40238 Secretary of State

AGENCY OFM NO.

235

REQUEST F. RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

RECORDS COORDINATOR PHONE NO. DATE OF SUBMITTAL 902-5111 PAGE 1 934 Administrative Services - Legal Services - Third RECORDS OFFICER PHONE NO. RECORDS COORDINATOR CONTACT NAME REFERENCE: RCW 40.14 (Required) I hereby confity that I have completed an ind examined this schedule for accuracy. Christina Johnson OFFICE NAME Party appraisal of the record series and examined this RECORDS OFFICER SIGNATURE Department of Labor and Industries Olympia, WA 98504-0238 (360) 586-4901 ADDRESS (MS or Street, City and Zip Code) AGENCY

04-16-2010 10-06-62204 902-5777 6 years 0 m0 72 mo Action Resolved OPR Description: Provides documentation of third party case files in their various stages. Used as a tracking tool to capture key information about the cases, includes fiscal documentation. Media: electronic. Title: THIRD PARTY TRACKING SYSTEM NEW ☐ REVISED ☐ TRANSFER Revision No. / Statement: Lysa Homan Walker RECORDS OFFICER NAME MS: 44288

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Wind Secretary of State PC

Washington State Archives
Records Management Section
PO Box 40238
Olympia, WA 98504-0238
(360) 586-4901

REQUEST FLA RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER

REFERENCE: RCW 40.14

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RECORDS COORDINATOR PHONE NO. DESIGNATION/REMARKS OFFICE NO. March 8, 2010 DATE OF SUBMITTAL 206,543,0573 10-010-62239 10-010-62240 DISPOSITION AUTHORITY NO. UWGS 08-15 RECORDS OFFICER PHONE NO. 206.543.7590 TOTAL (Years) က Any Office RECORDS COORDINATOR CONTACT NAME INACTIVE (Months in Records Center 0 Andrea Watts ACTIVE (Months in Office) 36 38 OFFICE NAME Copy is sent to Radiation Safety File Closed CUT-OFF OPRIOFIM OFM OFM RECORDS OFFICER SIGNA appraisal of the record Revision No. / Statement This revision applies to the other copy held by the labs. This revision increases the retention period from 2 years, changes the cut-off from After Last Inspection or Material Returned/Dispersed, Whitchever is Longer, and revises the description. The previous description was "Form sent to Radiation Safety along with radioactive materials once a lab has completed use of materials. Indicates where the materials were maintained and how they were distributed in the lab." radioisotope is no longer in a usable form as well as its method of disposal. Data is removed from database when form is submitted to Revision No. / Statement This revision reduces the retention of the Provides a record of complaint investigations and resolutions of complaints. May include information about complaints, Harassment Complaints either filed with or investigated by Title: Complaint Files (includes Discrimination and Sexual Form sent to Radiation Safety from a lab indicating that a Title: Disposal of Radioactive Waste - Form 160 University of Washington □ NEW X REVISED □ TRANSFER ☐ NEW X REVISED ☐ TRANSFER other copy from 6 years. STATUS / TITLE / DESCRIPTION ADDRESS (MS or Street, City and Zip Code) correspondence, etc. AGENCY Radiation Safety. RECORDS OFFICER NAME Barbara Benson Box 354910 AGENCY OFM NO. TEM NO.

	STATE RECORDS COMMITTEE / RECORDS MANAGEMENT STAFE ACTION	
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Date: 04-v2010		
Phone 685-1437	Box 352165	
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FSO: Campus Engineering		
University of	Washington	

University facilities - to assure a safe, healthy, efficient and effective environment in support of the University's teaching, research Campus Engineering provides professional engineering support for the design, construction, operation and maintenance of all and public service programs.

The following record series is new – Preservation, Renovation and Modernization Files

The following series is being modified – 93-01-51844 – Capital Construction Project (CCP) Files – Review and Comment

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Box 3	Box 352165		/ Butch	h Kuecks					685-	685-1437
RECORDS (RECORDS OFFICER NAME Barbara Benson	RECORDS OFFICER SIGNATURE (Recu	MATURE ABEQUE	ired) I herebykerfrig that I have completed an Olympia sandille for additional	I have completed		RECORDS OFFICER PHONE NO. 206-543-7950	E NO.	-	DATE OF SUBMITTAL May 13, 2010
VI TEM NO	STATUSATILEDESCRIPTION	NOLL	OPR./	CUT-OFF	ACTIVE: (Months in Office)	RETENTION INACTIVE (Months in Records Center)	TOTAL (Years)	DISPOSITION AUTHORITY NO. (DAN)		ARCHIVAL DESIGNATION REMARKS
2	X NEW REVISED TRANSFER reservation, Renovation, and Moderniz	X NEW TREVISED TRANSFER Preservation, Renovation, and Modernization (PRAM) Files	OPR	Calendar Year	120	0	10	10-06-62226		Potentially Archival
TI PPI EN	This series provides a record of planning and budgeting process maintenance of UW Buildings f Facman Reports, renewal progribiennium budgets - actual and pestimates, etc.	This series provides a record of documents used as a resource in the planning and budgeting process for the preservation, renovation, and maintenance of UW Buildings for facilities management. May include Facman Reports, renewal programs, building audit information, biennium budgets - actual and projected, major renovation planning, cost estimates, etc.	72							

	STATE RECORDS COMMI	RDS COMMITTEE/F	ITTEE/RECORDS MANAGEMENT STAFF ACTION	
ACTION:	☐ Approved	☐ Returned	☐ Returned to agency for further work	DATE OF ACTION:
FOR THE STATE AUDITOR	FOR THE ATTORNEY GENERAL	NEY GENERAL	FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrp (no change to total), series discontinued and replaced by the State General Schedules, and office	SIGNATURE: For minor revision laced by the State General Sche	ons to title/descrption, increadules, and office transfers.	UTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrption, increase in Records Center retention/reduction in office retention or change to total), series discontinued and replaced by the State General Schedules, and office transfers.	FOR RECORDS MANAGEMENT STAFF

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Mallery, Michele

From:

Andrea Watts [wattsa@u.washington.edu]

Sent: To: Wednesday, May 12, 2010 4:40 PM

Subject:

Mallery, Michele RE: office 08.09

Follow Up Flag: Flag Status:

Follow up Flagged

Hi Michele.

The description for the PRAM files was reviewed by the Campus Engineering office so I assume that Facman is spelled correctly.

The reason why we are not using GS 21011 "Construction Documentation Non-General..." is because the function of that series is different from the series we are submitting for approval. The PRAM Files record series contains reports and recommendations which recommend future construction projects. The cut-off of these records is Calendar Year because it is not tied to a specific building, as the "Construction Documentation" is with its cut-off of Disposition of Building. Also, this office is not charged with managing the construction project files for the University.

Hope this helps. Please let me know if you have any further questions.

Thanks,

Andrea

Andrea L. Watts
University of Washington
Records Management Services
Phone 206-543-0573
Fax 685-9538
Box 354910

From: Mallery, Michele [mailto:michele.mallery@sos.wa.gov]

Sent: Wednesday, May 12, 2010 2:54 PM

To: Andrea Watts

Subject: RE: office 08.09

Andrea,

I am writing to you on behalf of the Washington State Archivist and would like to thank you for submitting the records retention schedules for the University of Washington Office 08/09 – Facilities Services: Campus Engineering dated May 11, 2010 which was received and reviewed by the Records Management Office on May 12, 2010.

I have reviewed the submitted schedule for Office 08/09 – Facilities Services: Campus Engineering and request the following corrections:

Just wanting to make sure Facman is spelled correctly!

Also, this looks like it could also be covered under GS 21011. Please clarify as to why you are not using the State GS.

Please make the requested corrections and re-submit an electronic copy for review.

In the meantime, if you have any questions on the status of this schedule, please don't hesitate to contact me by email or telephone (360) 586-4901.

Best Regards, Michele Mallery

State Government Records Management Specialist Washington State Archives Office of the Secretary of State 1129 Washington Street SE; MS: 40238 Olympia, WA 98504

[Please note new email address] Michele.Mallery@sos.wa.gov

Phone: 360-586-4901 Fax: 360-586-0368

To receive updates on records management advice, records retention schedules and training, click on the following link:

http://www.sos.wa.gov/archives/RecordsManagement/records state.aspx

Learn more about the Washington State Archives

Review the State Records Committe Minutes
Review the Local Records Committee Minutes

From: Andrea Watts [mailto:wattsa@u.washington.edu]

Sent: Tuesday, May 11, 2010 8:35 AM

To: Mallery, Michele Subject: office 08.09

Mallery, Michele

From: Sent:

Andrea Watts [wattsa@u.washington.edu]

To:

Wednesday, May 12, 2010 4:40 PM Mallery, Michele

Subject:

RE: office 08.09

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Thanks.

Andrea

Andrea L. Watts University of Washington Records Management Services Phone 206-543-0573 Fax 685-9538 Box 354910

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Sent: Wednesday, May 12, 2010 2:54 PM

To: Andrea Watts

Subject: RE: office 08.09

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Best Regards, Michele Mallery

State Government Records Management Specialist Washington State Archives Office of the Secretary of State 1129 Washington Street SE; MS: 40238 Olympia, WA 98504

[Please note new email address] Michele.Mallery@sos.wa.gov

Phone: 360-586-4901 Fax: 360-586-0368

To receive updates on records management advice, records retention schedules and training, click on the following link:

http://www.sos.wa.gov/archives/RecordsManagement/records state.aspx

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Learn more about the Washington State Archives

Review the State Records Committe Minutes
Review the Local Records Committee Minutes

From: Andrea Watts [mailto:wattsa@u.washington.edu]

Sent: Tuesday, May 11, 2010 8:35 AM

To: Mallery, Michele Subject: office 08.09

University of	Payroll	Records Authority:	Phone	Date:
Washington		Ginny Montgomery	543-8625	03-29-2010
			Box 355655	

The Payroll office is responsible for the payroll operations of the University of Washington.

The following series are new—
Employee Separation Payment Authorization
Shared Leave Documentation
Social Security Audit Documentation
Annual Attendance Incentive Program
Form 1007 (Foreign National Data Sheet)
Certification Report: Grant and Contract
OPUS (Online Payroll Updating System)

06-07-61227 - 1388 Form (Determination of Foreign National's Residence for Tax Purposes) 95-MF-55559 - Payroll Folder (Paper/Microfilm/Electronic) The following series are being discontinued --95-07-55566 - W2 Listing Book

The following series are being revised – 98-11-58940 -0 Payroll Input Register 95-07-55560 – Retroactive Salary Transfer 06-07-61228 – Batches (ETR/PTR, RA)

09.07.00 Rev 22

	Washington Siz Records Mana; PO Box 40238 Olympia. WA 9	Washington State Archives Records Management Section PO Box 40238 Olympia, WA 98504-0238	R	REQUEST , A RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER	RECORD DSITION	S RETENT AUTHORIT	TION SCH Y NUMBE	EDULE :R		
	(360) 586-4901	4901		<u>R</u>	EFERENC	REFERENCE: RCW 40,14	14		Page	Page 1 of 5
AGENC	AGENCY OFM NO. AGENCY		OFFICE NAME	Ш				OFFICE NO.	K	REVISION #
	University of Washington	ashington	Payroll					/20/60/		REV: 22
ADDRE	ADDRESS (MS or Street, City and Zip Code)		RECORDS C	RECORDS COORDINATOR CONTACT NAME	CT NAME			RECC	RDS COOR	RECORDS COORDINATOR PHONE NO.
Bo)	Box 355655		Ginn)	nny Montgomery					543-8625	625
RECOR E	RECORDS OFFICER NAME Barbara Benson	RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an appraisal of the record series and examined this schedule for accuracy.	TURE (Requand	ired) I hereby certify that d this schedule for accur	I have completer racy.	-	RECORDS OFFICER PHONE NO 206-543-7950	E NO.	d'G	DATE OF SUBMITTAL May 11, 2010
ITEM	STATUS/TITLE/DESCRIPTION		OPR/	CUT-OFF	· · · · · · · · · · · · · · · · · · ·	RETENTION	では、大学のでは、	NOFISOSIO		SARCHIVAL
0 2			OFM F		ACTIVE (Months	, INACTIVE (Months in Records Center)	TOTAL (Years)	AUTHORITY NO (DAN)		DESIGNATION FEMARKS
	NEW X REVISED TRANSFER	(9)	OFM	Payroll Cycle	9	0	0.50	88-6-42501r1R22	5	
	Circumstant Aminor Garden (Conv. 13)	6								
	An authorization form submitted electronically and in hardcopy to Payroll by employees requesting their wage payments be deposited lirectly to a specified bank account.	ally and in hardcopy to payments be deposited				_				
	(This revision changes the cut-off from Until Superseded, changes the litle from Bank Deposit Authorization (UoW 1376), and reduces the petention period from 1 year.)	il Superseded, changes the vW 1376), and reduces the								
2	TRANSFER TRANSFER		OFM	Payroll Cycle	12	0	1	98-11-58940r1R22	22	
!	Payroll laput Register				,					
	Concise summary, by employce, of all data entry per payroll cycle. Used for bank reconciliation. (The same information also appears in more detailed form on the employce's check/advices and on the Payroll Audit Report 150 years1.)	entry per payroll cycle. Used tion also appears in more ces and on the Payroll Audit				-				
	This revision increases the retention period from 6 months.)	from 6 months.)							=	

	STATE RECORDS C	RDS COMMITTEE/F	COMMITTEE/RECORDS MANAGEMENT STAFF ACTION	
ACTION:	☐ Approved	☐ Returned	Returned to agency for further work	DATE OF ACTION:
FOR THE STATE AUDITOR	FOR THE ATTORNEY GENERAL	4EY GENERAL	FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
AUTHORIZED RECORDS MANAGEMENT STAFF no change to total), series discontinued and rep	SIGNATURE: For minor revision placed by the State General Sche	ins to title/descrption, incredules, and office transfers	AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrption, increase in Records Center retention/reduction in office retention (no change to total), series discontinued and replaced by the State General Schedules, and office transfers.	FOR RECORDS MANAGEMENT STAFF

JLE Page 2 of 5	OFFICE NO. REVISION # REV: 22	RECORDS COORDINATOR PHONE NO.	543-8625	DATE OF SUBMITTAL May 11, 2010	DISPOSITION	AUTHORITY NO.	95-07-55560r1R22				06-07-61228r1R22	
JEST 1 JA RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REFERENCE: RCW 40.14				RECORDS OFFICER PHONE NO. 206-543-7950		(Years)	6 95-0				0-90 9	
A RECORDS RETENTIC POSITION AUTHORITY REFERENCE: RCW 40.14					RETENTION	(Nonths in Records Center)	09				0	
		CONTACT NAME	omery	ertify that I have comp for accuracy.		ACTIVE (Months in Office)	12				e 72	
REQUEST I	FICE NAME Payroll	RECORDS COORDINATOR CONTACT NAME	inny Montgomery	(Required) I hereby o camined this schedule	COTTOFF		ج Month			<u> </u>	Rayroll Cycle	
	OFFICE Pa	RECOF	<u></u>	IGNATURE	OPR	OFM	OPR		an if	· · · · · · · · · · · · · · · · · · ·	OPR	
Washington State Archives Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901	NO. AGENCY University of Washington	ADDRESS (MS or Street, City and Zip Code)		RDS OFFICER NAME RECORDS OFFICER SIGNATURE (Required) I hereby certify that I have completed an appraisal of the record series and examined this schedule for accuracy.	STATUS/ITILE/DESCRIPTION		NEW X REVISED TRANSFER	Retranctive Salary Transfer	orm which is used to request and provide a record of adjustments to an advividual's salary record. Used with both state and grant and contract sudgets. May provide the only record of the transfer of funds from one sudget to another. Includes transfers from suspense account. As of 1.22008, these documents are available on My Financial Desktop.	This revision reduces the retention period from 10 years and modifies he description. The previous description was "Form which is used to equest and provide a record of adjustments to an individual's salary ecord. Used with both state and grant and contract budgets. May provide the only record of the transfer of funds from one budget to mother. Includes transfers from suspense account)	NEW X REVISED TRANSFER BAICHGS (ETR/FTR, RA)	This series is comprised of screen prints taken from payroll databases ind is used internally as a quick reference for entries made into the nayroll system for payment or payroll adjustments. Includes notes egarding changes to database entries. [This revision changes the title from Batches (ETR/PTR, etc.).
	AGENCY OFM NO.	ADDRESS (MS	Box 355655	RECORDS OFFICER NAME Barbara Bens	ITEM	0	Z 	•	Form v indivic budget budget 12-200	This r the des reques record provide	4 Batche	This se ind is payroll egardi

ACTION: Approved Returned to agency for further work DATE OF ACTION: FOR THE STATE AUDITOR FOR THE OFFICE OF FINANCIAL MANAGEMENT FOR THE STATE ARCHIVIST AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrption, increase in Records Center retention/reduction in office retention FOR RECORDS MANAGEMENT STAFF		STATE RECORDS COMMITTEE	STATE RECORDS COMMITTEE/RECORDS MANAGEMENT STAFF ACTION	
ERAL FOR THE OFFICE OF FINANCIAL MANAGEMENT e/descrption, increase in Records Center retention/reduction in office retention nd office transfers.	ACTION:		d to agency for further work	DATE OF ACTION:
e/descrption, increase in Records Center retention/reduction in office retention nd office transfers.	FOR THE STATE AUDITOR	FOR THE ATTORNEY GENERAL	FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
e/descrption, increase in Records Center retention/reduction in office retention nd office transfers.				
	AUTHORIZED RECORDS MANAGEMENT STAFF (no change to total), series discontinued and ret	F SIGNATURE: For minor revisions to title/descrption, in placed by the State General Schedules, and office transf	crease in Records Center retention/reduction in office retention ers.	FOR RECORDS MANAGEMENT STAFF

	Washington Sta Records Manag PO Box 40238 Olympia, WA 99 (360) 586-4901	Washington State Archives Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901	RE	QUEST F AND DISE	RECORE OSITION EFERENC	UEST ? RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REFERENCE: RCW 40.14	TION SCH Y NUMBI	EDULE ER	Page	Page 3 of 5
AGENC 360	AGENCY OFM NO. AGENCY 360 University of Washington		OFFICE NAME Payrol	=======================================				OFFICE NO. 109/07/		REVISION # REV: 22
ADDRE Bo	ADDRESS (MS or Street, City and Zip Code) Box 355655		RECORDS CO	RECORDS COORDINATOR CONTACT NAME Ginny Montgomery	CT NAME V			RECO	RDS COORDINAT 543-8625	RECORDS COORDINATOR PHONE NO. 543-8625
RECOR	RECORDS OFFICER NAME Barbara Benson	RECORDS OFFICER SIGNATURE (Regulation appraisal of the record series after experience)	TUKE (Regu	$K \subset \Sigma \subset M$	I have completed an		RECORDS OFFICER PHONE NO 206-543-7950	E NO.		DATE OF SUBMITTAL May 14, 2010
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Q N			OFM		ACTIVE (Months in Office)	INACTIVE (Months in Records Center)	TOTAL (Years)	AUTHORITY NO. (DAN)		DESIGNATION/ REMARKS
25	NEW REVISED TRANSFER Employce Separation Payment Authorization Forms	s Zation Forms	OPR	Calendar Year	24	48	9	10-06-62227		
	This series provides a record of the authorized payment of an employee's unused annual leave and unused compensatory time at the time of separation from the University and also the authorized payment of sick leave at retirement. Includes employee information and departmental signature(s).	rized payment of an employce's atory time at the time of te authorized payment of sick formation and departmental					• :			
9	X NEW REVISED TRANSFER Shared Leave Documentation	2	OPR	Calendar Year	24	48	9	10-06-62228		
	This series provides a record of the transfer of leave between individuals at the UW or other state agencies. Includes approval from the agency's Human Resources office and supporting documentation of the transfer of money between budgets.	er of leave between individuals sapproval from the agency's locumentation of the transfer of			`					
7	X NEW REVISED TRANSFER Social Security Audit Documentation	۲	OFM	Calendar Year	24	24	4	10-06-62229		
	This series provides a record of corrections made to an employees social security number within the Payroll database. Includes a copy of the employees' social security card and other documentation regarding the change.	is made to an employees social ise. Includes a copy of the documentation regarding the								

	STATE RECOR	NDS COMMITTEE/R	STATE RECORDS COMMITTEE/RECORDS MANAGEMENT STAFF ACTION	
ACTION:	☐ Approved	☐ Returned	Returned to agency for further work	DATE OF ACTION:
FOR THE STATE AUDITOR	FOR THE ATTORNEY GENERAL	EY GENERAL	FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrption, incre (no change to total), series discontinued and replaced by the State General Schedules, and office transfers.	SIGNATURE: For minor revision aced by the State General Schec	is to title/descrption, incre lules, and office transfers.	AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrption, increase in Records Center retention/reduction in office retention (no change to total), series discontinued and replaced by the State General Schedules, and office transfers.	FOR RECORDS MANAGEMENT STAFF

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AGENCY OFM NO.		PO Box 40238	1	AND DISP	OSITION	AND DISPOSITION AUTHORITY NUMBER	TY NUMB!	ER	-	
AGENCY OFM		Olympia, WA 98504-0238 (360) 586-4901		R	EFERENC	REFERENCE: RCW 40.14	14		Pag	Page 4 of 5
	ă	BENCY University of Washington	OFFICE NAME Payroll	AE 				OFFICE NO. 109/07/		REVISION # REV: 22
ADDRESS (ME	Ü		RECORDS C		CT NAME			REC	CORDS COC	RECORDS COORDINATOR PHONE NO.
Box 355655	5655		Ginny		y				543-	543-8625
RECORDS OFFICER NAME Barbara Bens	RDS OFFICER NAME Barbara Benson	RECORDS OFFICER STAND	ATURE (Requi	ujen) hereby certify that I have completed an	t I have complete racy.		RECORDS OFFICER PHONE NO 206-543-7950	NE NO.		DATE OF SUBMITTAL May 14, 2010
				Д — — — — — — — — — — — — — — — — — — —		RETENTION	The Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Co	NOISBOSITION		ARCHIVAL
NO N			O O		ACTIVE (Months in Office)	INACTIVE (Months in Records Center)	TOTAL (Years)	AUTHORITY NO (DAN)		DESIGNATION/ REMARKS
8 Ann	X NEW REVISED TRANSFE Annual Attendance Incentive Program	TRANSFER ve Program	OPR	Calendar Year	24	48	ဝ	10-06-62230		
This cligit chock the for p	series provides a recordible sick leave hours for 1 oses to participate and mudes employee sick leave agout as well as employe	This series provides a record of the authorized payment of an employee's cligible sick leave hours for payout at 25% value (if the employee chooses to participate and meets the program requirements). The form includes employee sick leave information, budget(s) and percentage(s) for payout as well as employee and departmental signatures.	- 				€			
e For	🗶 NEW 📋 REVISED 🔲 TRANSFER Form 1007 (Foreign National Data Sheet)	TRANSFER nal Data Sheet)	OFM	Calendar Year	24	24	4	10-06-62231		
The used Student morr creat	The form 1007 replaces the fored for all foreign national Student Fiscal Services Paym more detailed summary of for created for tax purposes.	The form 1007 replaces the form 1388 in Jan. 2009. The Form 1007 is used for all foreign national payments (Payroll, Accounts Payable, Student Fiscal Services Payments and Travel). This record provides a more detailed summary of foreign national individual's residency and is created for tax purposes.								
10 K	X NEW REVISED TRANSFER Certification Report: Grant and Contract	TRANSFER nt and Contract	OFM	End of Month	0	36	3	10-06-62232		
Prov for a are (Inve	vides a means for verifica a grant or contract. After only available in COM. I sstigator's signature, resid	Provides a means for verification of payroll by the Principal Investigator for a grant or contract. After 2002, the reports were no longer printed and are only available in COM. The audit copy, which includes the Principal Investigator's signature, resides in the individual departments.		and the second second					,	

	STATE RECORDS COMM	AMITTEE/RECOI	IITTEE/RECORDS MANAGEMENT STAFF ACTION	
ACTION:	☐ Approved ☐	Returned to ag	Returned to agency for further work	DATE OF ACTION:
FOR THE STATE AUDITOR	FOR THE ATTORNEY GENERAL		FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
		_		
AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrption, incre (no change to total), series discontinued and replaced by the State General Schedules, and office transfers.	SIGNATURE: For minor revisions to title/de acced by the State General Schedules, and o	scrption, increase in R	AUTHORIZED RECORDS MANAGEMENT STAFF SIGNATURE: For minor revisions to title/descrption, increase in Records Center retention/reduction in office retention (no change to total), series discontinued and replaced by the State General Schedules, and office transfers.	FOR RECORDS MANAGEMENT STAFF

	Washin Record PO Boy Olympi (360) 5	Washington State Archives Records Management Section PO Box 40238 Olympia, WA 98504-0238 (360) 586-4901	R	REQUEST F RECORDS RETENTION SCHEDULE AND DISPOSITION AUTHORITY NUMBER REFERENCE: RCW 40.14	RECORD DSITION ,	REFERENCE: RCW 40.14	TION SCH FY NUMBI	IEDULE ER	Pag	Page 5 of 5
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Σ	X NEW REVISED TRANSFER OPUS (Online Payroll Updating System)	ER em)	OPR	Fiscal Year	009	0	50	10-06-62233		
	Provides a record of the UW online payroll system which allows a department to create/update payroll information on a new or existing employee. OPUS allows a department to make updates instantaneously and eliminates the need for a central office (Payroll) to enter payroll changes. These updates and payroll changes include initial hires/rehires, distribution, budget number changes, leave of absences and separations. The system houses an employee's Payroll records; current and historical.	roll system which allows a prmation on a new or existing to make updates instantaneously fice (Payroll) to enter payroll anges include initial hires/rehires, save of absences and separations.								

	STATE RECORDS COMMITTEE/	STATE RECORDS COMMITTEE/RECORDS MANAGEMENT STAFF ACTION	
ACTION:	☐ Approved ☐ Returned	Returned to agency for further work	DATE OF ACTION:
FOR THE STATE AUDITOR	FOR THE ATTORNEY GENERAL	FOR THE OFFICE OF FINANCIAL MANAGEMENT	FOR THE STATE ARCHIVIST
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	ed: Kenab Med: Kesident	Records routhority:	Phone 685-0936	Date: 032010
hington T	ing Program	Karen Ennes	BX 356490	

The University of Washington Department of Rehabilitation Medicine's mission is to improve the function, level of independence, and quality of life of people who have disabilities brought about by illness, injury, or of congenital origin.

The following series are being modified -

94-04-53698 - Medical Student Evaluation Form

96-02-56476 - Medical Resident/Fellow Evaluation of Residency Training Program/Faculty

96-02-56477 - Medical Resident Evaluation of Residency/Fellowship Training

The following series are out of the jurisdiction of the Records Management Services Office and are being transferred to the jurisdiction of the Hospital Records Management Program –

94-04-53703 - On Call Schedules

94-04-53704 - Residency Verification and Evaluation Form

94-04-53705 - Resident Physician Vacation/Educational Leave Form

94-04-53706 - Resident Rotation Schedules

94-04-53707 - Resident Tracking and Billing System

All series for this office not found on this retention schedule can be found in the UW General Records Retention Schedule.

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Resi	tesident/Fellow Files			Complete						
Prov Reha to ve	Trovides a comprehensive record of accepted applicants to the Achabilitation Medicine Resident/Fellowship Training Program, o verify medical training. Includes evaluation forms, letters of ecommendation, correspondence, residents training calendar.	ants to the ng Program. Used s, letters of calendar,								
Resid	electromyography log book, appointment letters, Certification of testidency, rotation schedule, Certificate of Completion of testident/Fellowship Program, evidence of disciplinary action.	riffcation of ion of uy action.								
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	NEW X REVISED TRANSFER		OFM	Academic	12	0	_	94-04-53698r1R3		
	Medical Student Evaluation Form			Quarter	-					
Prov clerk skills chars	Provides evaluative record of medical students upon completion of slerkship. Includes evaluative comments regarding clinical knowledge, skills, interpersonal relationships, and personal/professional characteristics.	completion of Hinical knowledge. ssional								
(This	(This revision changes the cut-off from calendar year and reduces the retention period from 2 years.)	r and reduces the		[

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	Provides a record of medical resident/fellow evaluation of clinical training and opportunities for pationt contact as well as evaluation instructor effectiveness and skill. May be used in connection with faculty promotion issues.	Provides a record of medical resident/fellow evaluation of clinical raining and opportunities for patient contact as well as evaluation of instructor effectiveness and skill. May be used in connection with aculty promotion issues.								
	This revision changes the title from Medical Resident Evaluation Residency Training Program/Faculty, reduces the retention period years, and modifies the description. The previous description was 'Provides a record of medical resident evaluation of clinical trainin phportunities for patient contact as well as evaluation of instructor effectiveness and skill.")	This revision changes the title from Medical Resident Evaluation of Residency Training Program/Faculty, reduces the retention period from 5 years, and modifies the description. The previous description was Provides a record of medical resident evaluation of clinical training and apportunities for patient contact as well as evaluation of instructor								
_ a	UNEW X REVISED TRA	TRANSFER	OFM	Summary	1 60	С	2.	96-02-56477r1R3		
n	Medical Resident Evaluation of Residency/Fellowship Training Program/Faculty-Summary	Residency/Fellowship Training		Complete		•	,	1		
	Annual summary of medical resident/lellow evaluation of clinical training and instructor. Compiled per teaching site and per faculty member. May be used in connection with faculty promotion issue	Annual summary of modical resident/fellow evaluation of clinical raining and instructor. Compiled per teaching site and per faculty nember. May be used in connection with faculty promotion issues.								
	This revision changes the title from Medical Resident Evaluation Residency Training Program/FacultySummary, removes the Pot Archival designation, and modifies the description. The previous description was "Annual summary of medical resident evaluation; plinical training and instructor.")	This revision changes the title from Medical Resident Evaluation of Acsidency Training Program/Faculty—Summary, removes the Potentially Archival designation, and modifies the description. The previous lescription was "Annual summary of medical resident evaluation of slinical training and instructor.")								

	STATE RECORDS COMMITTEE/	COMMITTEE/RECORDS MANAGEMENT STAFF ACTION	
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V. Other Business